

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 07 01 2006 through 09 30 2006

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 10 13 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Society of Association Executives APAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		24048.79
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	22079.17									
(c) Total Receipts (from Line 19)	12234.45	50896.23								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	34313.62	74945.02								
7. Total Disbursements (from Line 31)	25214.27	65845.67								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	9099.35	9099.35								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Society of Association Executives APAC

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	7900.00	30700.00
(i) Itemized (use Schedule A)	4330.00	15180.00
(ii) Unitemized	12230.00	45880.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	5000.00
(c) Other Political Committees (such as PACs)	12230.00	50880.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	4.45	16.23
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))	12234.45	50896.23
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12234.45	50896.23

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	214.27	845.67
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	214.27	845.67
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	65000.00
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))..	25214.27	65845.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	25214.27	65845.67

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	12230.00	50880.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12230.00	50880.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	214.27	845.67
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	214.27	845.67

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<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 V. Cross, CAE

Mailing Address 114 Coolidge St

City State Zip Code
Silverton OR 97381-2008

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

Name of Employer Occupation
WV Cross Enterprises President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 08 / 2006

Transaction ID: C235681

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
James C. Dinegar, CAE

Mailing Address 2420 North Lincoln St

City State Zip Code
Arlington VA 22207

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

Name of Employer Occupation
Greater Washington Board of Trade President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 24 / 2006

Transaction ID: C231539

Amount of Each Receipt this Period
250.00

C. 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 Occupation
Association Management Center Principal

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
07 / 14 / 2006

Transaction ID: C231546

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 27
	(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

Full Name (Last, First, Middle Initial) A. Carolyn R. Fazio, ECAM		Date of Receipt M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6	
Mailing Address PO Box 1207		Transaction ID: C235686	
City Boca Raton	State FL	Amount of Each Receipt this Period 500.00	
Zip Code 33429-1207		FEC ID number of contributing federal political committee. C	
Name of Employer Fazio International Ltd	Occupation Chair and Chief Operating Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. John H. Graham, IV, CAE		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6	
Mailing Address 1575 I St NW #1200		Transaction ID: C231554	
City Washington	State DC	Amount of Each Receipt this Period 250.00	
Zip Code 20005-1103		FEC ID number of contributing federal political committee. C	
Name of Employer ASAE & The Center for Association Lead	Occupation President and CEO, ASAE		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) C. John M. Grau		Date of Receipt M M / D D / Y Y Y Y 0 7 / 1 4 / 2 0 0 6	
Mailing Address 3 Bethesda Metro Ctr #1100		Transaction ID: C231544	
City Bethesda	State MD	Amount of Each Receipt this Period 100.00	
Zip Code 20814-5330		FEC ID number of contributing federal political committee. C	
Name of Employer National Electrical Contractors Associ	Occupation Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	850.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Pamela Hemann, CAE

Mailing Address 253 North San Gabriel Blvd 1st Fl

City Pasadena State CA Zip Code 91107

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

Name of Employer Association Management Services Inc Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2006

Transaction ID: C235675

Amount of Each Receipt this Period
 750.00

B. Full Name (Last, First, Middle Initial)
Robert A. Kobek

Mailing Address 3815 River Crossing Blvd #20

City Indianapolis State IN Zip Code 46240

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

Name of Employer Mobius Vendor Partners 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
 08 / 15 / 2006

Transaction ID: C235695

Amount of Each Receipt this Period
 500.00

C. Full Name (Last, First, Middle Initial)
Dawn P. Latham, CAE

Mailing Address NE 7058B
2025 E St NW

City Washington State DC Zip Code 20006

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

Name of Employer American Red Cross National Headquarte Occupation Government Relations and Public Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 25 / 2006

Transaction ID: C236543

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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

Full Name (Last, First, Middle Initial) A. Peter B. Lauer, CAE		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 3975 Fair Ridge Dr #400 N		Transaction ID: C236539	
City State Zip Code Fairfax VA 22033	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Society of Interventional Radiology	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) B. Jonathan T. Mack		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 615 West 22nd St		Transaction ID: C231564	
City State Zip Code Oak Brook IL 60523	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Associated Equipment Distributors	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. Kevin B. McCray, CAE		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 601 Dempsey Rd		Transaction ID: C236542	
City State Zip Code Westerville OH 43081-8978	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer National Ground Water Association	Occupation Executive Director		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<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)
Joseph M. McGuire, CAE

Mailing Address 1111 19th St NW #402

City State Zip Code
Washington DC 20036-3627

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

Name of Employer Association of Home Appliance Manufact
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 04 / 2006

Transaction ID: C235680

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Louis B. Novick

Mailing Address One Church St #400

City State Zip Code
Rockville MD 20850

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

Name of Employer Novick Group Inc
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
07 / 11 / 2006

Transaction ID: C231565

Amount of Each Receipt this Period
100.00

C. 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 Associatio
Occupation Assistant Executive Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2006

Transaction ID: C235676

Amount of Each Receipt this Period
500.00

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<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) Paul Pomerantz, CAE		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 444 East Algonquin Rd		Transaction ID: C235673	
City State Zip Code Arlington Heights IL 60005-4654		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer American Society of Plastic Surgeons		Occupation Executive Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) J. Clarke Price, CAE		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2006	
Mailing Address 535 Metro Pl S PO Box 1810		Transaction ID: C231538	
City State Zip Code Dublin OH 43017-7810		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Ohio Society of CPAs		Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

C. Full Name (Last, First, Middle Initial) J. Clarke Price, CAE		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2006	
Mailing Address 535 Metro Pl S PO Box 1810		Transaction ID: C236540	
City State Zip Code Dublin OH 43017-7810		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Ohio Society of CPAs		Occupation President and Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 750.00	

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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 12 / 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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 W. Rock

Mailing Address 517 C St NE

City State Zip Code
Washington DC 20002

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

Name of Employer
Parry Romani and DeConcini Inc

Occupation
Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 21 / 2006

Transaction ID: C231571

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Susan Sarfati, CAE

Mailing Address Reagan Bldg and Intl Trade Center
1300 Pennsylvania Ave NW

City State Zip Code
Washington DC 20004

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

Name of Employer
ASAE & The Center for Association Lead

Occupation
Pres/CEO, The Ctr for Assn Leadership

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 11 / 2006

Transaction ID: C231537

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Donald B. Shea, CAE

Mailing Address 1400 K St NW #900

City State Zip Code
Washington DC 20005-2403

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

Name of Employer
Rubber Manufacturers Association

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 Y
07 / 21 / 2006

Transaction ID: C231550

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) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 27
	<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

Full Name (Last, First, Middle Initial) A. John W. Sisco, Ed.D., CAE		Date of Receipt M M / D D / Y Y Y Y 07 / 21 / 2006	
Mailing Address 10825 Midwest Industrial Blvd		Transaction ID: C231563	
City State Zip Code Saint Louis MO 63132	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Mechanical Contractors Association of	Occupation Executive Vice President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. John F. Sturm		Date of Receipt M M / D D / Y Y Y Y 07 / 17 / 2006	
Mailing Address 1921 Gallows Rd #600		Transaction ID: C231572	
City State Zip Code Vienna VA 22182-3900	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Newspaper Association of America	Occupation President and Chief Executive Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) C. Barney Thompson, CAE		Date of Receipt M M / D D / Y Y Y Y 08 / 31 / 2006	
Mailing Address 609 Weisgarber Rd		Transaction ID: C235674	
City State Zip Code Knoxville TN 37919	Amount of Each Receipt this Period 1000.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Knoxville Area Association of Realtors	Occupation Executive Vice President and CEO		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

SUBTOTAL of Receipts This Page (optional) ▶	1350.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 14 / 27	
	(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"/> 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)
Frederick L. Webber

Mailing Address 1401 I St NW #900

City State Zip Code
Washington DC 20005

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

Name of Employer Occupation
Alliance of Automobile Manufacturers President and Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	6

Transaction ID: C231542

Amount of Each Receipt this Period

250.00

Aggregate Year-to-Date ▼

250.00

SUBTOTAL of Receipts This Page (optional)	▶	250.00
TOTAL This Period (last page this line number only)	▶	7900.00

**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 15 / 27

<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

Full Name (Last, First, Middle Initial) A. American Express Travel Related Service Co., Inc.		Transaction ID: D33148 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="07"/> <input type="text" value="03"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="2.25"/>	
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. American Express Travel Related Service Co., Inc.		Transaction ID: D33149 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="07"/> <input type="text" value="11"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="7.31"/>	
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C. American Express Travel Related Service Co., Inc.		Transaction ID: D33150 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="07"/> <input type="text" value="21"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="1.13"/>	
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10.69"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 16 / 27

<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

Full Name (Last, First, Middle Initial) A. American Express Travel Related Service Co., Inc.		Transaction ID: D33151 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="07"/> / <input type="text" value="24"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="2.25"/>	
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) B. American Express Travel Related Service Co., Inc.		Transaction ID: D34055 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="09"/> / <input type="text" value="01"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="24.75"/>	
Candidate Name	Category/ Type	
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:		

Full Name (Last, First, Middle Initial) C. American Express Travel Related Service Co., Inc.		Transaction ID: D34056 Date of Disbursement
Mailing Address P.O. Box 53852		<input type="text" value="09"/> / <input type="text" value="05"/> / <input type="text" value="2006"/>
City Phoenix	State AZ	Zip Code 85072-3852
Purpose of Disbursement Credit Card Expense	<input type="text" value="24.75"/>	
Candidate Name	Category/ Type	
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:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="51.75"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

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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

Full Name (Last, First, Middle Initial) A. Paymentech		Transaction ID: D34057 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 1601 Elm Street Suite 700		Amount of Each Disbursement this Period 36.92
City Dallas State TX Zip Code 75201	Purpose of Disbursement Credit Card Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Paymentech		Transaction ID: D33152 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 5 / 2 0 0 6
Mailing Address 1601 Elm Street Suite 700		Amount of Each Disbursement this Period 66.41
City Dallas State TX Zip Code 75201	Purpose of Disbursement Credit Card Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Paymentech		Transaction ID: D33499 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 6
Mailing Address 1601 Elm Street Suite 700		Amount of Each Disbursement this Period 48.50
City Dallas State TX Zip Code 75201	Purpose of Disbursement Credit Card Expense Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	151.83
TOTAL This Period (last page this line number only) ▶	214.27

**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 18 / 27

<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

Full Name (Last, First, Middle Initial) A. Brady for Congress		Transaction ID: D33846 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 3323 North Washington Blvd.		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22201	Purpose of Disbursement Contribution Candidate Name Rep. Kevin Brady Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 8		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Brady for Congress		Transaction ID: D32143 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 3323 North Washington Blvd.		Amount of Each Disbursement this Period 1000.00
City Arlington State VA Zip Code 22201	Purpose of Disbursement Contribution Candidate Name Rep. Kevin Brady Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 8		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Charles A Gonzalez Congressional Campaign		Transaction ID: D32094 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
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 Candidate Name Rep. Charles A. Gonzalez Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 20		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL 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)

PAGE 19 / 27

<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

Full Name (Last, First, Middle Initial) A. Gordon Smith for US Senate (96)		Transaction ID: D33470 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 6
Mailing Address 228 S Washington St Ste 115		Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314-5404		
Purpose of Disbursement Debt Retirement		Category/ Type
Candidate Name Sen. Gordon Smith		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 1996 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District:		

Full Name (Last, First, Middle Initial) B. Kevin McCarthy for Congress		Transaction ID: D32195 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 12667		Amount of Each Disbursement this Period 1000.00
City Bakersfield State CA Zip Code 93389		
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Kevin McCarthy		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District:		

Full Name (Last, First, Middle Initial) C. Kirk For Congress Inc		Transaction ID: D32095 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address P O Box 2776		Amount of Each Disbursement this Period 500.00
City Arlington State VA Zip Code 22202		
Purpose of Disbursement Contribution		Category/ Type
Candidate Name Rep. Mark S. Kirk		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL District: 10		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL 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)

PAGE 20 / 27

<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. Levin For Congress Committee Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 37 City Roseville State MI Zip Code 48066 Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D32198 Date of Disbursement 07 / 28 / 2006 Amount of Each Disbursement this Period 500.00
--	--	--

B. Levin For Congress Committee Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 37 City Roseville State MI Zip Code 48066 Purpose of Disbursement Contribution Candidate Name Rep. Sander M. Levin Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D33852 Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 500.00
--	--	--

C. Mike Ross For Congress Committee Full Name (Last, First, Middle Initial) Mailing Address PO Box 360 City Prescott State AR Zip Code 71857 Purpose of Disbursement Contribution Candidate Name Rep. Mike Ross Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 4 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transaction ID: D33850 Date of Disbursement 09 / 19 / 2006 Amount of Each Disbursement this Period 500.00
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SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL 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

Full Name (Last, First, Middle Initial) A. People For English		Transaction ID: D32093 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address PO Box 1940		Amount of Each Disbursement this Period 500.00
City Erie State PA Zip Code 16507	Purpose of Disbursement Contribution Candidate Name Rep. Philip S. English Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 3 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. McCarthy for Congress		Transaction ID: D32097 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address PO Box 190		Amount of Each Disbursement this Period 1000.00
City Mineola State NY Zip Code 11501	Purpose of Disbursement Contribution Candidate Name Rep. Carolyn McCarthy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 4 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Rangel for Congress		Transaction ID: D32098 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 1 / 2 0 0 6
Mailing Address PO Box 5577		Amount of Each Disbursement this Period 1000.00
City New York State NY Zip Code 10027	Purpose of Disbursement Contribution Candidate Name Rep. Charles B. Rangel Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

PAGE 22 / 27

<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

Full Name (Last, First, Middle Initial) A. Bass Victory Committee		Transaction ID: D32199 Date of Disbursement 07 / 28 / 2006
Mailing Address PO Box 3451		Amount of Each Disbursement this Period 500.00
City Concord	State NH	
Zip Code 03302		
Purpose of Disbursement Contribution		
Candidate Name Rep. Charles Bass		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NH District: 2		

Full Name (Last, First, Middle Initial) B. Van Hollen for Congress		Transaction ID: D32191 Date of Disbursement 07 / 28 / 2006
Mailing Address 10605 Concord St., Ste. 101		Amount of Each Disbursement this Period 1000.00
City Kensington	State MD	
Zip Code 20895		
Purpose of Disbursement Contributions		
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: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 8		

Full Name (Last, First, Middle Initial) C. Dave Camp for Congress		Transaction ID: D33853 Date of Disbursement 09 / 19 / 2006
Mailing Address P.O. Box 423		Amount of Each Disbursement this Period 500.00
City Midland	State MI	
Zip Code 48640		
Purpose of Disbursement Contribution		
Candidate Name Rep. Dave Camp		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District: 4		

SUBTOTAL of Disbursements This Page (optional)	2000.00
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

Full Name (Last, First, Middle Initial) A. Earl Pomeroy for Congress		Transaction ID: D33851 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 746		Amount of Each Disbursement this Period 1000.00
City Bismarck	State ND	
Zip Code 58502		
Purpose of Disbursement Contribution Candidate Name Rep. Earl Pomeroy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: ND District: AL		

Full Name (Last, First, Middle Initial) B. Buck McKeon for Congress		Transaction ID: D33849 Date of Disbursement 09 / 19 / 2006
Mailing Address 24265 San Fernando Rd.		Amount of Each Disbursement this Period 1000.00
City Santa Clarita	State CA	
Zip Code 91321		
Purpose of Disbursement Contribution Candidate Name Rep. Howard McKeon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 25		

Full Name (Last, First, Middle Initial) C. J.D. Hayworth for Congress		Transaction ID: D32100 Date of Disbursement 07 / 11 / 2006
Mailing Address 10789 North 90th Street, #102		Amount of Each Disbursement this Period 1000.00
City Scottsdale	State AZ	
Zip Code 85260		
Purpose of Disbursement Contribution Candidate Name Rep. J.D. Hayworth Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: AZ District: 5		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty field)

**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

Full Name (Last, First, Middle Initial) A. Meek for Congress		Transaction ID: D33856 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 6
Mailing Address 111 NW 183rd Street, Ste. 325		Amount of Each Disbursement this Period 1000.00
City Miami State FL Zip Code 33169		
Purpose of Disbursement Contribution Candidate Name Rep. Kendrick B. Meek Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 17	Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Abercrombie for Congress		Transaction ID: D33848 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6
Mailing Address 1517 Kapiolani Blvd.		Amount of Each Disbursement this Period 1000.00
City Honolulu State HI Zip Code 96814		
Purpose of Disbursement Contribution Candidate Name Rep. Neil Abercrombie Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 1	Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. Velazquez for Congress		Transaction ID: D32201 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address 315 Inspiration Lane		Amount of Each Disbursement this Period 500.00
City Gaithersberg State MD Zip Code 20878		
Purpose of Disbursement Contribution Candidate Name Rep. Nydia M. Velazquez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 12	Category/Type	
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL 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

Full Name (Last, First, Middle Initial) A. Richard E. Neal For Congress Committee		Transaction ID: D33847 Date of Disbursement 09 / 19 / 2006
Mailing Address PO Box 2884		Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20013	Category/ Type	
Purpose of Disbursement Contributions		
Candidate Name Rep. Richard E. Neal		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Roskam for Congress		Transaction ID: D32096 Date of Disbursement 07 / 11 / 2006
Mailing Address PO Box 713		Amount of Each Disbursement this Period 1000.00
City Wheaton State IL Zip Code 60189-0713	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Peter Roskam		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Nelson for U.S. Senate		Transaction ID: D32192 Date of Disbursement 07 / 28 / 2006
Mailing Address 1915 North 121st Street		Amount of Each Disbursement this Period 1000.00
City Omaha State NE Zip Code 68154	Category/ Type	
Purpose of Disbursement Contribution		
Candidate Name Sen. Ben Nelson		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL 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

Full Name (Last, First, Middle Initial) A. Friends of George Allen		Transaction ID: D32197 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address P.O. Box 6859		Amount of Each Disbursement this Period 1000.00
City Arlington	State VA	
Zip Code 22206	Purpose of Disbursement Contribution	
Candidate Name Sen. George Allen	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District:		

Full Name (Last, First, Middle Initial) B. Friends for Harry Reid		Transaction ID: D32144 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6
Mailing Address 1325 East Vegas Valley Dr., Ste. A		Amount of Each Disbursement this Period 1000.00
City Las Vegas	State NV	
Zip Code 89109	Purpose of Disbursement Contribution	
Candidate Name Sen. Harry Reid	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV District:		

Full Name (Last, First, Middle Initial) C. Jon Kyl for U.S. Senate		Transaction ID: D32202 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 8 / 2 0 0 6
Mailing Address 3900 East Camelback, Suite 200		Amount of Each Disbursement this Period 1000.00
City Phoenix	State AZ	
Zip Code 85018	Purpose of Disbursement Contribution	
Candidate Name Sen. Jon L. Kyl	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial) A. Enzi for US Senate		Transaction ID: D32145 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 9 / 2 0 0 6	
Mailing Address 112 E. Second St.		Amount of Each Disbursement this Period 1000.00	
City Casper State WY Zip Code 82601	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Sen. Michael B. Enzi			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WY District:			

Full Name (Last, First, Middle Initial) B. Santorum 2006		Transaction ID: D33854 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 9 / 2 0 0 6	
Mailing Address 436 South Main Street		Amount of Each Disbursement this Period 1000.00	
City Pittsburgh State PA Zip Code 15220	Purpose of Disbursement Contribution	Category/ Type	
Candidate Name Sen. Rick Santorum			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA District:			

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

25000.00