

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 Washington DC 20005 Check if different than previously reported. (ACC)

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, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of DC

5. Covering Period 10 16 2008 through 11 24 2008

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 12 04 2008

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 grid and 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
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		20133.68
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	11016.77									
(c) Total Receipts (from Line 19)	12496.09	79048.90								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	23512.86	99182.58								
7. Total Disbursements (from Line 31)	154.65	75824.37								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23358.21	23358.21								
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
1	0

D	D
1	6

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	1

D	D
2	4

Y	Y	Y	Y
2	0	0	8

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	9720.09	52570.09
(i) Itemized (use Schedule A)	2775.00	20462.09
(ii) Unitemized	12495.09	73032.18
(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)	12495.09	78032.18
(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	1000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	1.00	16.72
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))	12496.09	79048.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12496.09	79048.90

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.....	154.65	1324.37
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	154.65	1324.37
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	74500.00
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))..	154.65	75824.37
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	154.65	75824.37

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)	12495.09	78032.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12495.09	78032.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	154.65	1324.37
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	154.65	1324.37

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(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)
Steven C. Anderson, IOM, CAE

Mailing Address 413 North Lee St
PO Box 1417-D49

City Alexandria State VA Zip Code 22314-1480

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

Name of Employer National Association of Chain Drug Sto
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
1 0 / 2 9 / 2 0 0 8

Transaction ID: C525513

Amount of Each Receipt this Period
500.00

B.

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

Mailing Address 1101 16th St NW #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 ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y
1 1 / 1 0 / 2 0 0 8

Transaction ID: C596292

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Christopher M. Bates, CAE

Mailing Address 301 North Fairfax St #200

City Alexandria State VA Zip Code 22314

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

Name of Employer Independent Office Products and Furnit
Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 2 9 / 2 0 0 8

Transaction ID: C525533

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **1100.00**

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 7 / 16
	<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) Barbara Belmont, CAE		Date of Receipt
	Mailing Address 700 South Washington St #300		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 2 / 2 0 0 8
	City	State	Zip Code
	Alexandria	VA	22314-4287
	FEC ID number of contributing federal political committee. C		Transaction ID: C525520
Name of Employer School Nutrition Association		Occupation Executive Director	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"/> 350.00	<input type="text"/> 100.00

B.	Full Name (Last, First, Middle Initial) William V. Cross, CAE		Date of Receipt
	Mailing Address 114 Coolidge St		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Silverton	OR	97381-2008
	FEC ID number of contributing federal political committee. C		Transaction ID: C525532
Name of Employer WV Cross Enterprises		Occupation 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"/> 250.00	<input type="text"/> 250.00

C.	Full Name (Last, First, Middle Initial) Matthew R. D'Uva, CAE		Date of Receipt
	Mailing Address 675 North Washington St #200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 0 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Alexandria	VA	22314
	FEC ID number of contributing federal political committee. C		Transaction ID: C525536
Name of Employer SOCAP International		Occupation 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"/> 300.00	<input type="text"/> 150.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 500.00
TOTAL 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 8 / 16

(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)
Jeff De Cagna, Ed.M.

Mailing Address 1830 Fountain Dr #402

City State Zip Code
Reston VA 20190

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

Name of Employer Occupation
Principled Innovation LLC Chief Strategist and Founder

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 240.18

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: C596305

Amount of Each Receipt this Period

120.09

B.

Full Name (Last, First, Middle Initial)
Loretta DeLuca

Mailing Address 8380 Colesville Rd #550

City State Zip Code
Silver Spring MD 20910-6262

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

Name of Employer Occupation
DelCor Technology Solutions CEO

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

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 1 / 2 0 0 8

Transaction ID: C596307

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)
Thomas C. Dolan, Ph.D., FAC

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 Occupation
American College of Healthcare Executives 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
1 0 / 2 8 / 2 0 0 8

Transaction ID: C525508

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

620.09

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 / 16
(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 J. Golden, CAE

Mailing Address 8224 Old Courthouse Rd

City Vienna State VA Zip Code 22182-3808

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

Name of Employer National Court Reporters Association
Occupation Executive Director and Chief Executive

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 04 / 2008
Transaction ID: C596290
Amount of Each Receipt this Period 1000.00

B.

Full Name (Last, First, Middle Initial)
Barbara Byrd Keenan, CAE

Mailing Address 525 West Van Buren #1000

City Chicago State IL Zip Code 60607

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

Name of Employer Institute of Food Technologists
Occupation Executive Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 10 / 28 / 2008
Transaction ID: C525525
Amount of Each Receipt this Period 250.00

C.

Full Name (Last, First, Middle Initial)
Kevin J. Kraushaar, CAE

Mailing Address 1250 Eye St NW #1101

City Washington State DC Zip Code 20005

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

Name of Employer Triadvocates, LLC
Occupation Managing Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt 11 / 13 / 2008
Transaction ID: C596296
Amount of Each Receipt this Period 100.00

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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 16
	<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	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 111 Newlands St	Transaction ID: C525527
	City State Zip Code Chevy Chase MD 20815	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation The Kushner Companies, LLC President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.	Full Name (Last, First, Middle Initial) John P. Langan, CPA	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 2900 South Quincy St #150	Transaction ID: C525516
	City State Zip Code Arlington VA 22206	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LarsonAllen LLP Principal in Charge, Metro DC	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

C.	Full Name (Last, First, Middle Initial) Michael C. McGough	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 8020 Towers Crescent Dr #250	Transaction ID: C525523
	City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation National Investor Relations Institute Vice President, Marketing & Membership	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional)	550.00
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 11 / 16
	<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) Joseph M. McGuire, CAE	Date of Receipt MM / DD / YYYY 11 / 13 / 2008
	Mailing Address 1111 19th St NW #402	Transaction ID: C596295
	City State Zip Code Washington DC 20036-3627	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Association of Home Appliance Manufact	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) Jane Robinson McLaughlin, CLU	Date of Receipt MM / DD / YYYY 10 / 28 / 2008
	Mailing Address 1700 Scenic Hwy #304	Transaction ID: C525521
	City State Zip Code Pensacola FL 32503	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Robinson McLaughlin and Associates	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C.	Full Name (Last, First, Middle Initial) Greg R. Melia, CAE	Date of Receipt MM / DD / YYYY 11 / 19 / 2008
	Mailing Address 1575 I St NW #1100	Transaction ID: C596304
	City State Zip Code Washington DC 20005-1103	Amount of Each Receipt this Period 250.00
	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: <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)	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 12 / 16

(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)

Arlene A. Pietranton, Ph.D., CAE

Mailing Address 2200 Research Boulevard #210

City State Zip Code
Rockville MD 20850-3289

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

Name of Employer
American Speech-Language-Hearing Assoc

Occupation
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
1 1 / 1 9 / 2 0 0 8

Transaction ID: C596303

Amount of Each Receipt this Period

500.00

B.

Full Name (Last, First, Middle Initial)

J. Clarke 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
Ohio Society of CPAs

Occupation
President and Chief Executive Officer

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 2 / 2 0 0 8

Transaction ID: C596286

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Philip H. Roberts

Mailing Address 348 Applegarth Rd

City State Zip Code
Monroe Township NJ 08831

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

Name of Employer
New Jersey Broadcasters Association

Occupation
President

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 2 / 2 0 0 8

Transaction ID: C525517

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 16

(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)

Brian D. Stevens

Mailing Address PO Box 69777

City State Zip Code
Los Angeles CA 90069

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

Name of Employer Occupation
ConferenceDirect President and Chief Executive Officer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1100.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C525512

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

Richard Umbdenstock

Mailing Address 325 Seventh St NW #700

City State Zip Code
Washington DC 20004

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

Name of Employer Occupation
American Hospital Association President and CEO

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

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 2 8 / 2 0 0 8

Transaction ID: C525537

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

Richard Yep, CAE

Mailing Address 5999 Stevenson Ave

City State Zip Code
Alexandria VA 22304-3300

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

Name of Employer Occupation
American Counseling Association Executive Director

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

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 1 7 / 2 0 0 8

Transaction ID: C596288

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 14 / 16	
	(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) James H. Youngblood		Date of Receipt																					
	Mailing Address 1400 K St NW #500		<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>1</td><td>1</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	1	/	2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1	/	2	1	/	2	0	0	8														
	City	State	Zip Code		Transaction ID: C596306																			
	Washington	DC	20005																					
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period																				
Name of Employer Heart Rhythm Society		Occupation Chief Executive Officer		500.00																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼																						
		500.00																						

SUBTOTAL of Receipts This Page (optional)	500.00
TOTAL This Period (last page this line number only)	9720.09

**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 / 16

<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>A. 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>Transaction ID: D74821 Date of Disbursement 10 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 33.35</p> <p>Category/Type</p>
<p>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>Transaction ID: D74822 Date of Disbursement 10 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 2.90</p> <p>Category/Type</p>
<p>C. 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>Transaction ID: D74823 Date of Disbursement 11 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 40.60</p> <p>Category/Type</p>

SUBTOTAL of Disbursements This Page (optional)	76.85
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)

PAGE 16 / 16

<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: D74825 Date of Disbursement																			
	Mailing Address P.O. Box 53852	<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>1</td><td>1</td><td>/</td><td>1</td><td>3</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	3	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	3	/	2	0	0	8												
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Expense	<table border="1"><tr><td>2.90</td></tr></table>	2.90																		
2.90																					
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) American Express Travel Related Service Co., Inc.	Transaction ID: D74826 Date of Disbursement																			
	Mailing Address P.O. Box 53852	<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>1</td><td>1</td><td>/</td><td>2</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	2	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	2	0	/	2	0	0	8												
	City Phoenix State AZ Zip Code 85072-3852	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Expense	<table border="1"><tr><td>7.25</td></tr></table>	7.25																		
7.25																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) Paymentech	Transaction ID: D74828 Date of Disbursement																			
	Mailing Address 1601 Elm Street Suite 700	<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>1</td><td>1</td><td>/</td><td>0</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	0	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	0	4	/	2	0	0	8												
	City Dallas State TX Zip Code 75201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Credit Card Expense	<table border="1"><tr><td>67.65</td></tr></table>	67.65																		
67.65																					
	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)	<table border="1"><tr><td>77.80</td></tr></table>	77.80
77.80		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>154.65</td></tr></table>	154.65
154.65		