

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
ArchiPAC -The American Institute of Architects

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

2. **FEC IDENTIFICATION NUMBER** C00139071  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 12 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Ms. Hannah Wesolowski

Signature of Treasurer Electronically Filed by Ms. Hannah Wesolowski Date 01 19 2010

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

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		27832.85
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	73840.94									
(c) Total Receipts (from Line 19) .....	14687.00	104641.74								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	88527.94	132474.59								
7. Total Disbursements (from Line 31) .....	35348.92	79295.57								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	53179.02	53179.02								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

ArchiPAC -The American Institute of Architects

Report Covering the Period: From: 

M	M
1	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	4520.00	32410.03
(ii) Unitemized .....	10167.00	72231.71
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	14687.00	104641.74
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	14687.00	104641.74
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
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)) .....	14687.00	104641.74
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14687.00	104641.74

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	348.92	3765.57
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	348.92	3765.57
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35000.00	62000.00
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	13530.00
(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	13530.00
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))..	35348.92	79295.57
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35348.92	79295.57

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	14687.00	104641.74
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	13530.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14687.00	91111.74
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	348.92	3765.57
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	348.92	3765.57

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

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

FOR LINE NUMBER: PAGE 6 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

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

**A.** Full Name (Last, First, Middle Initial)  
 Douglas A. Benson  
 Mailing Address 3004 NE 21st  
 City State Zip Code  
 Portland OR 97212-3446  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 7 / 2 0 0 9  
**Transaction ID:** 32625664  
 Amount of Each Receipt this Period  
 100.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 MCM Architects PC Architect  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 300.00

**B.** Full Name (Last, First, Middle Initial)  
 L. L. Claycomb  
 Mailing Address 6600 LBJ Freeway  
 City State Zip Code  
 Dallas TX 75240-6514  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 8 / 2 0 0 9  
**Transaction ID:** 32636900  
 Amount of Each Receipt this Period  
 500.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Claycomb Associates, Inc. Architect  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 500.00

**C.** Full Name (Last, First, Middle Initial)  
 Kristi W. Hanson  
 Mailing Address 72-813 Haystack Rd.  
 City State Zip Code  
 Palm Desert CA 92260-6051  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 1 2 / 0 8 / 2 0 0 9  
**Transaction ID:** 32636902  
 Amount of Each Receipt this Period  
 250.00  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Kristi Hanson, Architects Owner-Architect  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary    General  
 Other (specify) ▼ 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 850.00  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 15  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Kenneth L. Ross, Jr.</p> <p>Mailing Address 1020 Lone Star Dr</p> <p>City State Zip Code Houston TX 77055-6515</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation WHR Architects, Inc. Principal</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 12 / 08 / 2009</p> <p><b>Transaction ID:</b> 32636903</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Bill T. Wilson, II</p> <p>Mailing Address 200 Augusta</p> <p>City State Zip Code Portland TX 78374-4001</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation WKMC Architects, Inc. Architect</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 12 / 08 / 2009</p> <p><b>Transaction ID:</b> 32636904</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Thomas B. Braham</p> <p>Mailing Address 320 W. Oakdale Avenue, #603</p> <p>City State Zip Code Chicago IL 60657-5622</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Gensler Architect</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">450.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 12 / 16 / 2009</p> <p><b>Transaction ID:</b> 32841559</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1250.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 15  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial) Grant C. Uhlir		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	6		2	0	0	9													
Mailing Address 11 East Madison Street		<b>Transaction ID:</b> 32841561																				
City State Zip Code Chicago IL 60602-4574	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>250.00</td></tr></table>		250.00																			
250.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer Gensler	Occupation Architect																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>350.00</td></tr></table>		350.00																			
350.00																						

**B.**

Full Name (Last, First, Middle Initial) Michael Waldinger		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	6		2	0	0	9													
Mailing Address 648 W. Vine Street		<b>Transaction ID:</b> 32841562																				
City State Zip Code Springfield IL 62704-2847	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>200.00</td></tr></table>		200.00																			
200.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer AIA Illinois	Occupation Executive Vice President																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>300.00</td></tr></table>		300.00																			
300.00																						

**C.**

Full Name (Last, First, Middle Initial) Meggan Marie Lux		Date of Receipt <table border="1" style="font-size: small; text-align: center;"><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>2</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	6		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	6		2	0	0	9													
Mailing Address 1663 W. Pratt Boulevard Apt. 1		<b>Transaction ID:</b> 32841565																				
City State Zip Code Chicago IL 60626-4998	Amount of Each Receipt this Period <table border="1" style="width: 100%; text-align: right;"><tr><td>250.00</td></tr></table>		250.00																			
250.00																						
FEC ID number of contributing federal political committee. <table border="1" style="width: 100%; text-align: center;"><tr><td>C</td></tr></table>	C																					
C																						
Name of Employer UrbanWorks, Ltd.	Occupation Architect																					
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1" style="width: 100%; text-align: right;"><tr><td>310.00</td></tr></table>		310.00																			
310.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1" style="width: 100%; text-align: center;"><tr><td>700.00</td></tr></table>	700.00
700.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1" style="width: 100%; height: 20px;"></table>	



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

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

FOR LINE NUMBER: PAGE 9 / 15  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
 Leonard E. Koroski  
 Mailing Address 822 Monroe Street  
 City State Zip Code  
 Evanston IL 60202-2615  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Goettch Partners Occupation Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 850.00  
 Date of Receipt 12 / 16 / 2009  
**Transaction ID: 32841571**  
 Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
 Bruce E. Blackmer  
 Mailing Address 9608 E. Rockcrest Lane  
 City State Zip Code  
 Spokane WA 99206-9242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer NAC Architecture Occupation Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00  
 Date of Receipt 12 / 30 / 2009  
**Transaction ID: 32841591**  
 Amount of Each Receipt this Period 250.00

**C.** Full Name (Last, First, Middle Initial)  
 Duane K. Culp  
 Mailing Address 231 Catalpa Road  
 City State Zip Code  
 Lexington KY 40502-1911  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer HDR Architecture, Inc. Occupation Architect  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 240.00  
 Date of Receipt 12 / 31 / 2009  
**Transaction ID: 32841769**  
 Amount of Each Receipt this Period 240.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 990.00  
**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 10 / 15  
(check only one)

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

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

**A.**

Full Name (Last, First, Middle Initial)  
Donald L. Davison

Mailing Address 1709 Terrace Court

City State Zip Code  
Minot ND 58703-1138

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

Name of Employer Occupation  
Davison Larson Associates Architect

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** 32841770

Amount of Each Receipt this Period  
240.00

**B.**

Full Name (Last, First, Middle Initial)  
Barry A. Howard

Mailing Address 10012 Bahamas Court

City State Zip Code  
Fishers IN 46037-9740

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

Name of Employer Occupation  
HCO, Inc. Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** 32841787

Amount of Each Receipt this Period  
240.00

**C.**

Full Name (Last, First, Middle Initial)  
M. Arthur Gensler, Jr.

Mailing Address 2 Harrison Street

City State Zip Code  
San Francisco CA 94105-6126

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

Name of Employer Occupation  
Gensler Chairman

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
12 / 31 / 2009

**Transaction ID:** 32841821

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>730.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4520.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Friends Of Dave Reichert	Transaction ID: 32679226 Date of Disbursement																			
	Mailing Address P. O. Box 53322	<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>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	4	/	2	0	0	9												
	City Bellevue State WA Zip Code 98015	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. David George Reichert	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		Contribution																			

B.	Full Name (Last, First, Middle Initial) Sires For Congress	Transaction ID: 32679277 Date of Disbursement																			
	Mailing Address 6050 Blvd. East Apt. 6b	<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>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	4	/	2	0	0	9												
	City West New York State NJ Zip Code 07093	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name Rep. Albio Sires	011 Category/ Type																			
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		Contribution																			

C.	Full Name (Last, First, Middle Initial) Committee for a Livable Future	Transaction ID: 32679295 Date of Disbursement																			
	Mailing Address P.O. Box 6469	<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>2</td><td>/</td><td>1</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	1	4	/	2	0	0	9												
	City Portland State OR Zip Code 97228	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	011 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) ▼																			
		Contribution																			

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
Committee To Re-Elect Nydia M. Velazquez To Congre

Mailing Address 315 Inspiration Lane

City Gaithersburg State MD Zip Code 20878

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. Nydia M. Velazquez

Category/  
Type

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

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 32679442  
Date of Disbursement

/

Amount of Each Disbursement this Period

Contribution

**B.** Full Name (Last, First, Middle Initial)  
Dave Camp For Congress

Mailing Address 5915 Eastman Ave. Suite 100

City Midland State MI Zip Code 48640

Purpose of Disbursement  
Contribution

Candidate Name  
Rep. David Lee Camp

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MI District: 04

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 32679599  
Date of Disbursement

/

Amount of Each Disbursement this Period

Contribution

**C.** Full Name (Last, First, Middle Initial)  
Friends Of Barbara Boxer

Mailing Address PO Box 641751

City Los Angeles State CA Zip Code 90064

Purpose of Disbursement  
Contribution

Candidate Name  
Sen. Barbara Boxer

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District:

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 32679769  
Date of Disbursement

/

Amount of Each Disbursement this Period

Contribution

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 13 / 15

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee <hr/> Mailing Address 430 South Capitol Street, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> 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>Transaction ID:</b> 32679770 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 12500.00 <hr/> Contribution
<b>B.</b>	Full Name (Last, First, Middle Initial) RNC Majority Fund <hr/> Mailing Address 310 First Street, SE <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> 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>Transaction ID:</b> 32679771 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 12500.00 <hr/> Contribution
<b>C.</b>	Full Name (Last, First, Middle Initial) Schauer For Congress <hr/> Mailing Address PO Box 100 <hr/> City Battle Creek State MI Zip Code 49016 <hr/> Purpose of Disbursement Check uncashed; Itemized in July Monthly Candidate Name Rep. Mark Schauer <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> 32679773 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period -500.00 <hr/> Check uncashed; Itemized in July Monthly

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>24500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b> Full Name (Last, First, Middle Initial) Schauer For Congress <hr/> Mailing Address PO Box 100 <hr/> City Battle Creek State MI Zip Code 49016 Purpose of Disbursement Contribution Candidate Name Rep. Mark Schauer Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32679774 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 Contribution
<b>B.</b> Full Name (Last, First, Middle Initial) Findley For Congress <hr/> Mailing Address 1045 Clover Drive <hr/> City Mclean State VA Zip Code 22101 Purpose of Disbursement Contribution Candidate Name Mr. Dennis Findley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 32684902 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 5 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00 Contribution

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

1000.00

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

35000.00

**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)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) PAYPAL INC.</p> <p>Mailing Address PO Box 45950</p> <p>City Omaha State NE Zip Code 68145</p> <p>Purpose of Disbursement Credit Card Monthly and Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33043722 <b>Date of Disbursement</b> 12 / 31 / 2009</p> <p>Amount of Each Disbursement this Period 38.45</p> <p>001 Category/ Type</p> <p>Credit Card Monthly and Processing Fees</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Suntrust</p> <p>Mailing Address 1750 New York Ave., NW</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Credit Card Service Charges and Processing Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33043730 <b>Date of Disbursement</b> 12 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 267.67</p> <p>001 Category/ Type</p> <p>Credit Card Service Charges and Processing Fees</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Authorize.Net</p> <p>Mailing Address PO Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Credit Card Processing Monthly Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> 33043764 <b>Date of Disbursement</b> 12 / 02 / 2009</p> <p>Amount of Each Disbursement this Period 42.80</p> <p>001 Category/ Type</p> <p>Credit Card Processing Monthly Fees</p>

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

**348.92**

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

**348.92**