

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. U.S. Travel Association PAC

ADDRESS (number and street) 1100 New York Avenue Suite 450W Washington DC 20005

2. FEC IDENTIFICATION NUMBER C C00457754 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, 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

5. Covering Period 05 / 01 / 2016 through 05 / 31 / 2016

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 David Mimm

Signature of Treasurer David Mimm [Electronically Filed] Date 06 / 13 / 2016

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**U.S. Travel Association PAC**

Report Covering the Period: From:  /  /  To:  /  /

|  | COLUMN A<br>This Period                | COLUMN B<br>Calendar Year-to-Date      |
|--|--|--|
| 6. (a) Cash on Hand<br>January 1, <input type="text" value="2016"/>  |  | <input type="text" value="195314.15"/> |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | <input type="text" value="89351.40"/>  |  |
| (c) Total Receipts (from Line 19) .....  | <input type="text" value="25069.98"/>  | <input type="text" value="118900.23"/> |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | <input type="text" value="114421.38"/> | <input type="text" value="314214.38"/> |
| 7. Total Disbursements (from Line 31).....   | <input type="text" value="30586.50"/>  | <input type="text" value="230379.50"/> |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | <input type="text" value="83834.88"/>  | <input type="text" value="83834.88"/>  |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | <input type="text" value="0.00"/>      |  |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) ..... | <input type="text" value="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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**U.S. Travel Association PAC**

Report Covering the Period: From:  /  /  To:  /  /

| I. Receipts   | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:  |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees   |                               |                                   |
| (i) Itemized (use Schedule A).....  | 14301.66                      | 89080.80                          |
| (ii) Unitemized .....   | 768.32                        | 4807.43                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 15069.98                      | 93888.23                          |
| (b) Political Party Committees .....  | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs).....  | 5000.00                       | 20000.00                          |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....  | 20069.98                      | 113888.23                         |
| 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                          | 12.00                             |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....           | 5000.00                       | 5000.00                           |
| 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 Transfers (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))..... ▶                        | 25069.98                      | 118900.23                         |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 25069.98                      | 118900.23                         |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Allocated 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 .....   | 86.50                         | 364.50                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 86.50                         | 364.50                            |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 30500.00                      | 230000.00                         |
| 24. Independent Expenditures (use Schedule E) .....  | 0.00                          | 0.00                              |
| 25. Coordinated Party Expenditures (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                          | 15.00                             |
| (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                          | 15.00                             |
| 29. Other Disbursements .....  | 0.00                          | 0.00                              |
| 30. Federal Election Activity (2 U.S.C. §431(20))  |                               |                                   |
| (a) Allocated 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)) ..      | 30586.50                      | 230379.50                         |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 30586.50                      | 230379.50                         |

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>(from Line 11(d), page 3) .....        | 20069.98                      | 113888.23                         |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 15.00                             |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 20069.98                      | 113873.23                         |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 86.50                         | 364.50                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 12.00                             |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 86.50                         | 352.50                            |

**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 6 OF 20  |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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)  
**U.S. Travel Association PAC**

**A. Cathy Tull**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 998 Pleasing Plateau St  
 City Henderson State NV Zip Code 89002-3322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Las Vegas Conv. & Visitors Auth. Occupation Sr Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 225.00

Date of Receipt 05 / 02 / 2016  
**Transaction ID : AD2636864F79D4EF2A8A**  
 Amount of Each Receipt this Period 25.00  
 Memo Item

**B. Ruth Mensch**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 219 W Lake Dr  
 City Annapolis State MD Zip Code 21403-4430  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Partnership Manager  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 250.00

Date of Receipt 05 / 06 / 2016  
**Transaction ID : A61C1BB8D9EFD4EBFBAE**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**C. John Sprouls**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6228 Blakeford Dr  
 City Windermere State FL Zip Code 34786-5604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Universal Parks & Resorts Occupation Executive Vice President  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date 2000.00

Date of Receipt 05 / 11 / 2016  
**Transaction ID : AA0D9A9584EC14F67B65**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

|   |         |
|---|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | 2275.00 |
| <b>TOTAL</b> This Period (last page this line number only)..... |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 7 OF 20                 |
|   | <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             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A. Contina Djaouga**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9901 Redstone Ave  
 City Glenn Dale State MD Zip Code 20769-2128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Controller  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 202.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2016  
**Transaction ID : A1F44D4D00EB440DEB58**  
 Amount of Each Receipt this Period  
 22.50  
 Memo Item

**B. Lorraine Howerton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11900 Henderson Court  
 City Clifton State VA Zip Code 20124-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Senior Director, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 472.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2016  
**Transaction ID : A9230B81D51D24B9E92C**  
 Amount of Each Receipt this Period  
 52.50  
 Memo Item

**C. Jena McNeill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3801 7th Street  
 City North Beach State MD Zip Code 20714-9772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Sr. Director, Govt Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2016  
**Transaction ID : A5A4CA9FBEB7541098FA**  
 Amount of Each Receipt this Period  
 75.00  
 Memo Item

|  |        |
|--|--------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 150.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |        |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 8 OF 20                 |
|   | <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)  
**U.S. Travel Association PAC**

**A. David Mimm**  
Full Name (Last, First, Middle Initial)

Mailing Address 4515 Edsall Dr

City Woodbridge State VA Zip Code 22193-3139

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

Name of Employer U.S. Travel Association Occupation Vice President, Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2016

**Transaction ID : A43D634B60FA34168AB2**

Amount of Each Receipt this Period  
 25.00

Memo Item

**B. Gary Oster**  
Full Name (Last, First, Middle Initial)

Mailing Address 1922 Eamons Way

City Annapolis State MD Zip Code 21401-3196

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

Name of Employer U.S. Travel Association Occupation Executive Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1874.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 13 / 2016

**Transaction ID : AC99AA3A629914EEAB49**

Amount of Each Receipt this Period  
 208.33

Memo Item

**C. Caroline Coyle**  
Full Name (Last, First, Middle Initial)

Mailing Address 1828 Taos Estates St

City Las Vegas State NV Zip Code 89128-8259

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

Name of Employer Las Vegas Conv. & Visitors Auth. Occupation VP, Brand Strategy

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 16 / 2016

**Transaction ID : A950892030A17441F929**

Amount of Each Receipt this Period  
 20.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 253.33

**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 9 OF 20                 |
|   | <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             | <input type="checkbox"/> 17  |

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A. Cathy Tull**  
Full Name (Last, First, Middle Initial)

Mailing Address 998 Pleasing Plateau St

City Henderson State NV Zip Code 89002-3322

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

Name of Employer Las Vegas Conv. & Visitors Auth. Occupation Sr Vice President, Marketing

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 05 / 16 / 2016  
**Transaction ID : A7F925E83A606410A937**

Amount of Each Receipt this Period 25.00

Memo Item

**B. Carolyn Cawley**  
Full Name (Last, First, Middle Initial)

Mailing Address 2912 38th St NW

City Washington State DC Zip Code 20016-5401

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

Name of Employer U.S. Chamber of Commerce Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 05 / 17 / 2016  
**Transaction ID : AA97D86CBE21F40C9A77**

Amount of Each Receipt this Period 1000.00

Memo Item

**C. Dara Khosrowshahi**  
Full Name (Last, First, Middle Initial)

Mailing Address 333 108th Ave NE

City Bellevue State WA Zip Code 98004-5703

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

Name of Employer Expedia Inc Occupation Chief Executive Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 05 / 23 / 2016  
**Transaction ID : A98E4FCA034C24DA1994**

Amount of Each Receipt this Period 5000.00

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6025.00

**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 OF 20 |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 11b<br><input type="checkbox"/> 11c<br><input type="checkbox"/> 12<br><input type="checkbox"/> 13<br><input type="checkbox"/> 14<br><input type="checkbox"/> 15<br><input type="checkbox"/> 16<br><input type="checkbox"/> 17 |               |

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)  
**A. Gregory Stubblefield**

Mailing Address 5 Huntleigh Woods

|                     |             |                        |
|---------------------|-------------|------------------------|
| City<br>Saint Louis | State<br>MO | Zip Code<br>63131-4818 |
|---------------------|-------------|------------------------|

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

|  |  |
|--|--|
| Name of Employer<br>Enterprise Holdings Inc. | Occupation<br>Executive Vice President |
|--|--|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 26 / 2016  
**Transaction ID : A76FC821A962B49DC989**

Amount of Each Receipt this Period  
5000.00

Memo Item

Full Name (Last, First, Middle Initial)  
**B. Patrick Kaler**

Mailing Address 146 Bryant St

|                 |             |                        |
|-----------------|-------------|------------------------|
| City<br>Buffalo | State<br>NY | Zip Code<br>14222-2003 |
|-----------------|-------------|------------------------|

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

|   |                                 |
|---|---------------------------------|
| Name of Employer<br>Visit Buffalo Niagara | Occupation<br>President and CEO |
|---|---------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016  
**Transaction ID : ACECE5E788B434CFD97E**

Amount of Each Receipt this Period  
100.00

Memo Item

Full Name (Last, First, Middle Initial)  
**C. David Teel**

Mailing Address 3345 Bee Caves Rd Ste 102A

|                         |             |                        |
|-------------------------|-------------|------------------------|
| City<br>West Lake Hills | State<br>TX | Zip Code<br>78746-5463 |
|-------------------------|-------------|------------------------|

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

|   |                                 |
|---|---------------------------------|
| Name of Employer<br>Texas Travel Industry Association | Occupation<br>President and CEO |
|---|---------------------------------|

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 05 / 29 / 2016  
**Transaction ID : AB0855D723BED4D7196E**

Amount of Each Receipt this Period  
50.00

Memo Item

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5150.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ |         |

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

|   |   |                              |
|---|---|------------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)       | PAGE 11 OF 20                |
|   | <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)  
**U.S. Travel Association PAC**

**A. Contina Djaouga**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9901 Redstone Ave  
 City Glenn Dale State MD Zip Code 20769-2128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Controller  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **225.00**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : AA49DAD5A70F1403CB8E**  
 Amount of Each Receipt this Period **22.50**  
 Memo Item

**B. Lorraine Howerton**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11900 Henderson Court  
 City Clifton State VA Zip Code 20124-2200  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Senior Director, Government Relations  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **525.00**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : A4297D5CA2BDF47E2823**  
 Amount of Each Receipt this Period **52.50**  
 Memo Item

**C. Timothy C Kennedy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1834 Massachusetts Ave SE  
 City Washington State DC Zip Code 20003-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Sr. Director, Communications  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **200.00**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : A8DE4EC6A7C05453AA4F**  
 Amount of Each Receipt this Period **20.00**  
 Memo Item

|   |              |
|---|--------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>95.00</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |              |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 12 OF 20   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A. Jena McNeill**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3801 7th Street  
 City North Beach State MD Zip Code 20714-9772  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Sr. Director, Govt Relations  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **750.00**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : AE17915C7ED5F4B66845**  
 Amount of Each Receipt this Period **75.00**  
 Memo Item

**B. David Mimm**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4515 Edsall Dr  
 City Woodbridge State VA Zip Code 22193-3139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Vice President, Finance  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **250.00**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : A1162C50F7A7A40E1B79**  
 Amount of Each Receipt this Period **25.00**  
 Memo Item

**C. Gary Oster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1922 Eamons Way  
 City Annapolis State MD Zip Code 21401-3196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Executive Vice President  
 Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **2083.30**

Date of Receipt **05 / 30 / 2016**  
**Transaction ID : AD831F5D88B2441AEB00**  
 Amount of Each Receipt this Period **208.33**  
 Memo Item

|   |               |
|---|---------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....           | <b>308.33</b> |
| <b>TOTAL</b> This Period (last page this line number only)..... |               |

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

|   |  |   |
|---|--|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one)                                      | PAGE 13 OF 20   |
|   | <input checked="" type="checkbox"/> 11a<br><input type="checkbox"/> 13 | <input type="checkbox"/> 11b<br><input type="checkbox"/> 14 |

|                             |                             |                             |
|-----------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 12 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |
|-----------------------------|-----------------------------|-----------------------------|

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

**A. Caroline Coyle**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1828 Taos Estates St  
 City Las Vegas State NV Zip Code 89128-8259  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Las Vegas Conv. & Visitors Auth. Occupation VP, Brand Strategy  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2016  
**Transaction ID : A3C8B4FDE96FE415F9F8**  
 Amount of Each Receipt this Period  
 20.00  
 Memo Item

**B. Cathy Tull**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 998 Pleasing Plateau St  
 City Henderson State NV Zip Code 89002-3322  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Las Vegas Conv. & Visitors Auth. Occupation Sr Vice President, Marketing  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 05 / 31 / 2016  
**Transaction ID : A72D8FBE21F9341E8BDE**  
 Amount of Each Receipt this Period  
 25.00  
 Memo Item

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 Amount of Each Receipt this Period  
 Memo Item

|  |          |
|--|----------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 45.00    |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 14301.66 |

**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 14 OF 20   |
| <input type="checkbox"/> 11a  | <input type="checkbox"/> 11b | <input checked="" type="checkbox"/> 11c | <input type="checkbox"/> 12                             |
| <input type="checkbox"/> 13   | <input type="checkbox"/> 14  | <input type="checkbox"/> 15             | <input type="checkbox"/> 16 <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Enterprise Holdings Inc PAC</b>  |   | Date of Receipt<br>MM / DD / YYYY<br>05 / 26 / 2016 |
| Mailing Address 600 Corporate Park Drive  |   | <b>Transaction ID : AAF827DAFF0EA4A45BB8</b>        |
| City<br>Saint Louis   | State<br>MO                                   | Zip Code<br>63105-4204                              |
| FEC ID number of contributing federal political committee.<br>C C00219642   | Amount of Each Receipt this Period<br>5000.00 |   |
| Name of Employer  | Occupation                                    | <input type="checkbox"/> Memo Item                  |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br>5000.00           |   |

|   |                                    |                                    |
|---|------------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>B.</b>  |                                    | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |                                    |                                    |
| City  | State                              | Zip Code                           |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period |                                    |
| Name of Employer  | Occupation                         | <input type="checkbox"/> Memo Item |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼           |                                    |

|   |                                    |                                    |
|---|------------------------------------|------------------------------------|
| Full Name (Last, First, Middle Initial)<br><b>C.</b>  |                                    | Date of Receipt<br>MM / DD / YYYY  |
| Mailing Address   |                                    |                                    |
| City  | State                              | Zip Code                           |
| FEC ID number of contributing federal political committee.<br>C   | Amount of Each Receipt this Period |                                    |
| Name of Employer  | Occupation                         | <input type="checkbox"/> Memo Item |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼           |                                    |

|  |         |
|--|---------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | 5000.00 |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | 5000.00 |

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

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

FOR LINE NUMBER: PAGE 15 OF 20  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)  
**A. KATHLEEN MATTHEWS FOR CONGRESS**

Mailing Address **PO BOX 15236**

City State Zip Code  
**Chevy Chase MD 20825-5236**

FEC ID number of contributing federal political committee. **C C00578856**

Name of Employer Occupation

Receipt For: 2016  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**05 / 18 / 2016**

**Transaction ID : A7D8FCEC6B80F4036A7D**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
Refund of 9/9/2015 contribution.

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Memo Item

|  |                |
|--|----------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <b>5000.00</b> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <b>5000.00</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 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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 1100 H St NW

City Washington State DC Zip Code 20005-5476

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 02 / 2016

**Transaction ID : BA903AE94B8AB460C8C5**

Amount of Each Disbursement this Period

61.50

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Memo Item

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

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

61.50

61.50



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

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

FOR LINE NUMBER:  
(check only one)

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input 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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. DANIEL WEBSTER FOR CONGRESS**

Mailing Address 3400 Old Winter Garden Rd

City Orlando State FL Zip Code 32805-1134

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Daniel A. Webster**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 10

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : **BE2F8D875D73146FA82B**

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. HEARTLAND VALUES PAC**

Mailing Address PO BOX 505

City Sioux Falls State SD Zip Code 57101-0505

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: District:

Other

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : **B27B55AB3E5D34A26B73**

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Hoyer For Congress**

Mailing Address 499 South Capitol St SW  
Ste 406

City Washington State DC Zip Code 20003-4004

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Steny H. Hoyer**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MD District: 05

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : **B983F8D5E1C0C46AA859**

Amount of Each Disbursement this Period

3500.00

Memo Item

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

10000.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. LISA MURKOWSKI FOR US SENATE**

Mailing Address 1111 19th St NW  
Suite 1100

City Washington State DC Zip Code 20036-3621

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Lisa A. Murkowski**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: AK District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : **B870C3A729FB5489AA33**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. LOIS FRANKEL FOR CONGRESS**

Mailing Address c/o 4C Partners LLC  
501 3rd St NW, Ste 210

City Washington State DC Zip Code 20001-2770

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Lois J. Frankel**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 22

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : **BA380A2A5D8D842CFB9A**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. RICHMOND FOR CONGRESS**

Mailing Address ATTN: Ashley McNeil Coleman  
499 South Capitol St SW, Ste 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Cedric L. Richmond**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
05 / 13 / 2016

Transaction ID : **BA70FF82F2E82451D802**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. THE EYE OF THE TIGER POLITICAL ACTION COMMITTEE**

Mailing Address PO BOX 2485

City Springfield State VA Zip Code 22152-0485

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 13 / 2016

Transaction ID : B153A1FC967C445BB872

Amount of Each Disbursement this Period

8000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERIPAC: THE FUND FOR A GREATER AMERICA**

Mailing Address 700 13TH STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: District:

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2016

Transaction ID : BB4E8EDF99CE04B46A4A

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nita Lowey For Congress**

Mailing Address 3701 Porter Street NW

City Washington State DC Zip Code 20016-3103

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  Senate  President

Disbursement For: 2016  
 Primary  General  
 Other (specify)  Other

State: NY District: 17

Date of Disbursement

MM / DD / YYYY  
05 / 24 / 2016

Transaction ID : BEB90B2E96A6B4DDB95E

Amount of Each Disbursement this Period

1500.00

Memo Item

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

8000.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. VOLUNTEERS FOR SHIMKUS**

Mailing Address 499 South Capitol St SW  
Ste 420

City Washington State DC Zip Code 20003-4027

Purpose of Disbursement  
Political Contribution

Candidate Name

**John M. Shimkus**

Office Sought:  House  
 Senate  
 President  
State: IL District: 15

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : BFB814E7F8F754C229F8**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. SEAN PATRICK MALONEY FOR CONGRESS**

Mailing Address 410 First St SE  
Ste 310

City Washington State DC Zip Code 20003-1819

Purpose of Disbursement  
Political Contribution

Candidate Name

**Sean P. Maloney**

Office Sought:  House  
 Senate  
 President  
State: NY District: 18

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B06403FC8715E42A8A03**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

Memo Item

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

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