



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel 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="2015"/>  |                         | 112621.00                         |
| (b) Cash on Hand at<br>Beginning of Reporting Period.....  | 121331.69               |                                   |
| (c) Total Receipts (from Line 19) .....  | 3018.00                 | 14169.68                          |
| (d) Subtotal (add Lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B).....              | 124349.69               | 126790.68                         |
| 7. Total Disbursements (from Line 31).....   | 11195.67                | 13636.66                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)).....                         | 113154.02               | 113154.02                         |
| 9. Debts and Obligations Owed <b>TO</b><br>the Committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations Owed <b>BY</b><br>the Committee (Itemize all on<br>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

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel 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).....  | 595.00                        | 4290.84                           |
| (ii) Unitemized .....   | 2423.00                       | 9878.84                           |
| (iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶  | 3018.00                       | 14169.68                          |
| (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) .....  | 3018.00                       | 14169.68                          |
| 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 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))..... ▶                        | 3018.00                       | 14169.68                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶                                  | 3018.00                       | 14169.68                          |

**DETAILED SUMMARY PAGE**  
of Disbursements

| 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 .....   | 195.67                        | 483.74                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....                        | 195.67                        | 483.74                            |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 11000.00                      | 13000.00                          |
| 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                          | 152.92                            |
| (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                          | 152.92                            |
| 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)) ..      | 11195.67                      | 13636.66                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 11195.67                      | 13636.66                          |

**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) .....        | 3018.00                       | 14169.68                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                            | 0.00                          | 152.92                            |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....    | 3018.00                       | 14016.76                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b)) ..... | 195.67                        | 483.74                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3).....                 | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....              | 195.67                        | 483.74                            |

**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 11                |
| <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)  
**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>A. Jolee D. Goularte</b>  |   | Date of Receipt   |
| Mailing Address 14898 Rossmoyne Drive   |   | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City State Zip Code<br>San Jose CA 95124  |   | <b>Transaction ID : 10197</b>   |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/>                                       |   | Amount of Each Receipt this Period<br><input type="text" value="250.00"/>                             |
| Name of Employer<br>Flextronics   | Occupation<br>Sr. Manager Travel and Events                     |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="275.00"/> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>B. Mary Pelino</b>  |   | Date of Receipt   |
| Mailing Address 1170 Sea Shell Dr   |   | <input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2015"/> |
| City State Zip Code<br>Westerville OH 43082   |   | <b>Transaction ID : 10198</b>   |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/>                                       |   | Amount of Each Receipt this Period<br><input type="text" value="245.00"/>                             |
| Name of Employer<br>Fairfield Inn & Suites  | Occupation<br>Director of Sales                                 |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="265.00"/> |   |

|   |   |   |
|---|---|---|
| Full Name (Last, First, Middle Initial)<br><b>C. Lisa Stanford</b>  |   | Date of Receipt   |
| Mailing Address 17503 Days Dawn Dr.   |   | <input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2015"/> |
| City State Zip Code<br>Tomball TX 77377   |   | <b>Transaction ID : 10081</b>   |
| FEC ID number of contributing federal political committee. <input type="text" value="C"/>                                       |   | Amount of Each Receipt this Period<br><input type="text" value="100.00"/>                             |
| Name of Employer<br>BP America Inc.   | Occupation<br>Procurement Manager                               |   |
| Receipt For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼<br><input type="text" value="600.00"/> |   |

|  |                                     |
|--|-------------------------------------|
| <b>SUBTOTAL</b> of Receipts This Page (optional).....▶           | <input type="text" value="595.00"/> |
| <b>TOTAL</b> This Period (last page this line number only).....▶ | <input type="text" value="595.00"/> |

**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)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

Full Name (Last, First, Middle Initial)

**A. Edonation.com**

Mailing Address 118 N. Saint Asaph Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 07 / 2015

**Transaction ID : 10104**

Amount of Each Disbursement this Period

109.25

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address P O Box 143255

City San Jose State CA Zip Code 90222

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 24 / 2015

**Transaction ID : 10174**

Amount of Each Disbursement this Period

27.90

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. PayPal**

Mailing Address P O Box 143255

City San Jose State CA Zip Code 90222

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

**Transaction ID : 10175**

Amount of Each Disbursement this Period

0.92

Category/  
Type

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

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

138.07

**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)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address P O Box 143255

City San Jose State CA Zip Code 90222

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

**Transaction ID : 10199**

Amount of Each Disbursement this Period

8.05

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address P O Box 143255

City San Jose State CA Zip Code 90222

Purpose of Disbursement  
Credit Card Processing Fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
04 / 30 / 2015

**Transaction ID : 10200**

Amount of Each Disbursement this Period

7.90

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

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

15.95

154.02

**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)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

Full Name (Last, First, Middle Initial)

**A. BILIRAKIS FOR CONGRESS**

Mailing Address PO BOX 606

City TARPON SPRINGS State FL Zip Code 34688

Purpose of Disbursement  
Political Contribution

Candidate Name

**GUS M BILIRAKIS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: FL District: 12

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2015

**Transaction ID : 10099**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. BLUMENTHAL FOR CONNECTICUT**

Mailing Address C/O CACACE TUSCH & SANTAGATA  
777 SUMMER ST., SUITE 103

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement  
Political Contribution

Candidate Name

**RICHARD BLUMENTHAL**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CT District:

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2015

**Transaction ID : 10101**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. GRAVES FOR CONGRESS**

Mailing Address 2345 GRAND  
SUITE 2400

City KANSAS CITY State MO Zip Code 64108

Purpose of Disbursement  
Political Contribution

Candidate Name

**SAMUEL B SAM GRAVES**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: MO District: 06

Date of Disbursement

MM / DD / YYYY  
04 / 29 / 2015

**Transaction ID : 10095**

Amount of Each Disbursement this Period

2500.00

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

6000.00

**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)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

Full Name (Last, First, Middle Initial)

**A. HAL ROGERS FOR CONGRESS**

Mailing Address P.O. BOX 1214

City SOMERSET State KY Zip Code 42502

Purpose of Disbursement  
Political Contribution

Candidate Name

**HAROLD D ROGERS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: KY District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 10098**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Full Name (Last, First, Middle Initial)

**B. JOHN CARTER FOR CONGRESS**

Mailing Address 1717 NORTH IH-35  
SUITE 304

City ROUND ROCK State TX Zip Code 78664

Purpose of Disbursement  
Political Contribution

Candidate Name

**JOHN R. REP. CARTER**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: TX District: 31

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 0 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 10201**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

Full Name (Last, First, Middle Initial)

**C. LOBIONDO FOR CONGRESS**

Mailing Address P.O. BOX 550

City VINELAND State NJ Zip Code 08362

Purpose of Disbursement  
Political Contribution

Candidate Name

**FRANK A. LOBIONDO**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NJ District: 02

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 10097**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

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

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 3 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|   |   |   |   |   |   |   |   |   |   |

**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)

**GLOBAL BUSINESS TRAVEL ASSOCIATION PAC (Business Travel PAC)**

Full Name (Last, First, Middle Initial)

**A. MORAN FOR KANSAS**

Mailing Address P.O. BOX 1151

City HAYS State KS Zip Code 67601

Purpose of Disbursement  
Political Contribution

Candidate Name

**JERRY MORAN**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: KS District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 10100**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**B. QUIGLEY FOR CONGRESS**

Mailing Address 2652 N SOUTHPORT AVENUE  
UNIT E

City CHICAGO State IL Zip Code 60614

Purpose of Disbursement  
Political Contribution

Candidate Name

**MIKE QUIGLEY**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 05

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 9 |   | 2 | 0 | 1 | 5 |

**Transaction ID : 10096**

Amount of Each Disbursement this Period

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
|---|---|---|---|---|---|---|---|---|---|

Amount of Each Disbursement this Period

|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|--|

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

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

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 2 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| 1 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 |
|---|---|---|---|---|---|---|---|---|---|