

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. 12FE4M5
U.S. Travel Association PAC

ADDRESS (number and street) 1100 New York Avenue
Suite 450W
 Check if different than previously reported. (ACC) Washington DC 20005-3934

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00457754

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

(c) 12-Day PRE-Election Report for the:

| | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on M M M / D D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the:

| | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on M M M / D D D / Y Y Y Y Y Y in the State of

5. Covering Period 05 / 01 / 2020 through 05 / 31 / 2020

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

Djaouga, Contina, , ,

Type or Print Name of Treasurer

Signature of Treasurer Djaouga, Contina, , , [Electronically Filed] Date 06 / 15 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

U.S. Travel Association PAC

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

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|--|--|--|
| 6. (a) Cash on Hand January 1, <input type="text" value="2020"/> | <input type="text" value="296612.59"/> | <input type="text" value="296612.59"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="218021.04"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1521.66"/> | <input type="text" value="22074.61"/> |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... | <input type="text" value="219542.70"/> | <input type="text" value="318687.20"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="5276.00"/> | <input type="text" value="104420.50"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="214266.70"/> | <input type="text" value="214266.70"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY the Committee (Itemize all on 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. 05/2016)

Page 3

Write or Type Committee Name

U.S. Travel Association PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 05 / 01 / 2020 To: M M / D D / Y Y Y Y 05 / 31 / 2020

| 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)..... | 1241.66 | 6383.78 |
| (ii) Unitemized | 280.00 | 3190.83 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 1521.66 | 9574.61 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 10000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 1521.66 | 19574.61 |
| 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 | 2500.00 |
| 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)).....▶ | 1521.66 | 22074.61 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1521.66 | 22074.61 |

DETAILED SUMMARY PAGE
of Disbursements

| II. Disbursements | COLUMN A Total This Period | COLUMN B 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 | 276.00 | 420.50 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 276.00 | 420.50 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 5000.00 | 104000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(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)) .. | 5276.00 | 104420.50 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 5276.00 | 104420.50 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

| 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) | 1521.66 | 19574.61 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1521.66 | 19574.61 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 276.00 | 420.50 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 276.00 | 420.50 |

**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 13 |
| | <input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13 | <input type="checkbox"/> 11b <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. Briggs, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 New York Ave NW # 450
 City Washington State DC Zip Code 20005-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President, Industry Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1680.00

Date of Receipt 05 / 31 / 2020
Transaction ID : A4DE08A23D5344A08899
 Amount of Each Receipt this Period 420.00
 Memo Item
 Payroll Deduction: \$210.00/Bi-Weekly

B. Cowlishaw, Ben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Army Navy Dr Apt 1019
 City Arlington State VA Zip Code 22202-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Manager, Grassroots & PAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt 05 / 31 / 2020
Transaction ID : A727C9811D50A416CBCF
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$10.00/Bi-Weekly

C. Glenn, Treon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1613 Isherwood St NE Apt 2
 City Washington State DC Zip Code 20002-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Senior Director, Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt 05 / 31 / 2020
Transaction ID : A7D0A6D8102AA4BA594C
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll Deduction: \$45.00/Bi-Weekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 530.00 |
| 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 OF 13 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 |
| | <input type="checkbox"/> 12 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Hansen, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 11th St NW
 Apt 603
 City Washington State DC Zip Code 20001-6425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President of Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 750.00

Date of Receipt 05 / 31 / 2020
Transaction ID : AC2E4988A309F453085D
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$75.00/Bi-Weekly

B. Holmberg, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8334 Ridge Crossing Ln
 City Springfield State VA Zip Code 22152-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President, Program & Marketing S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt 05 / 31 / 2020
Transaction ID : A1CBD984652FC482BA87
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction: \$22.50/Bi-Weekly

C. Marchand, Djenane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3548 N Dickerson St
 City Arlington State VA Zip Code 22207-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) SVP, Membership & Industry Relations;
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1833.30

Date of Receipt 05 / 31 / 2020
Transaction ID : A0206EB8DA7CF498A8D6
 Amount of Each Receipt this Period 366.66
 Memo Item
 Payroll Deduction: \$183.33/Bi-Weekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 561.66 |
| 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 8 OF 13
(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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vance, Adam, , ,

Mailing Address 1645 Lozano Dr

City Vienna State VA Zip Code 22182-1947

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

Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Executive Vice President, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2020

Transaction ID : A89A03275B3E640ADA35

Amount of Each Receipt this Period
150.00

Memo Item
Payroll Deduction: \$75.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YYYY

Amount of Each Receipt this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional).....▶ | 150.00 |
| TOTAL This Period (last page this line number only).....▶ | 1241.66 |

**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"/> 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

A. HUIZENGA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 824 S Millidge Ave Ste 101
c/o PDS Compliance

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 05 | | 2020 |

City Athens State GA Zip Code 30605-1332

FEC Identification Number

Purpose of Disbursement
VOID - Contribution to Committee

| |
|-------------------|
| 011 |
| Category/ Type |

C C00459297

Transaction ID : BAC5FC1DFI

Amount of Each Disbursement this Period

| |
|-----------|
| - 2500.00 |
|-----------|

Candidate Name
Huizenga, Bill, P., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: MI District: 02

B. HUIZENGA FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 824 S Millidge Ave Ste 101
c/o PDS Compliance

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 05 | | 2020 |

City Athens State GA Zip Code 30605-1332

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

| |
|-------------------|
| 011 |
| Category/ Type |

C C00459297

Transaction ID : BAFE0B12FE

Amount of Each Disbursement this Period

| |
|---------|
| 2500.00 |
|---------|

Candidate Name
Huizenga, Bill, P., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: MI District: 02

C. JEFF DUNCAN FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 410 1st Street SE, Suite 310

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 05 | | 07 | | 2020 |

City Washington State DC Zip Code 20003-1866

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

| |
|-------------------|
| 011 |
| Category/ Type |

C C00460550

Transaction ID : B5ED170F43

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Candidate Name
Duncan, Jeff, D., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: SC District: 03

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

| |
|---------|
| 1000.00 |
|---------|

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"/> 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. JEFF DUNCAN FOR CONGRESS

Mailing Address 410 1st Street SE, Suite 310

City Washington State DC Zip Code 20003-1866

Purpose of Disbursement
VOID - Contribution to Committee

011

Candidate Name
Duncan, Jeff, D., ,

Category/
Type

Office Sought: House
 Senate
 President
State: SC District: 03

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 07 / 2020

FEC Identification Number

C C00460550

Transaction ID : **BF2BEA0783**

Amount of Each Disbursement this Period

- 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
B. TEAM GRAHAM INC

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement
VOID - Contribution to Committee

011

Candidate Name
Graham, Lindsey, , ,

Category/
Type

Office Sought: House
 Senate
 President
State: SC District:

Disbursement For: 2020
 Primary General
 Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 07 / 2020

FEC Identification Number

C C00458828

Transaction ID : **B75D8CD1C8**

Amount of Each Disbursement this Period

- 1000.00

Memo Item

Full Name (Last, First, Middle Initial)
C. TEAM GRAHAM INC

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement
VOID - Contribution to Committee

011

Candidate Name
Graham, Lindsey, , ,

Category/
Type

Office Sought: House
 Senate
 President
State: SC District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 07 / 2020

FEC Identification Number

C C00458828

Transaction ID : **B1FC9E338A**

Amount of Each Disbursement this Period

- 1500.00

Memo Item

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

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

- 3500.00

**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 type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <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. TEAM GRAHAM INC | | Date of Disbursement MM / DD / YYYY 05 / 07 / 2020 |
| Mailing Address 1006 Pendleton Street | | FEC Identification Number C00458828 Transaction ID : B2EB5B0EB3 Amount of Each Disbursement this Period 1000.00 |
| City Alexandria | State VA | Zip Code 22314-1837 |
| Purpose of Disbursement Contribution to Committee | | 011 Category/ Type |
| Candidate Name Graham, Lindsey, , , | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: SC | District: | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. TEAM GRAHAM INC | | Date of Disbursement MM / DD / YYYY 05 / 07 / 2020 |
| Mailing Address 1006 Pendleton Street | | FEC Identification Number C00458828 Transaction ID : BAC4000449f Amount of Each Disbursement this Period 1500.00 |
| City Alexandria | State VA | Zip Code 22314-1837 |
| Purpose of Disbursement Contribution to Committee | | 011 Category/ Type |
| Candidate Name Graham, Lindsey, , , | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) | |
| State: SC | District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. ELISE FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 05 / 28 / 2020 |
| Mailing Address 415 Warner Street NW | | FEC Identification Number C00547893 Transaction ID : B317CC17A9 Amount of Each Disbursement this Period 2500.00 |
| City Washington | State DC | Zip Code 20001-2409 |
| Purpose of Disbursement Contribution to Committee | | 011 Category/ Type |
| Candidate Name Stefanik, Elise, M., , | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NY | District: 21 | |

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

5000.00

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"/> 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

A. JONI ERNST FOR US SENATE INC

Full Name (Last, First, Middle Initial)

Mailing Address 1530 Wilson Blvd
Suite 440

City Arlington State VA Zip Code 22209-2447

Purpose of Disbursement Contribution to Committee

Candidate Name Ernst, Joni, K, ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: IA District:

Date of Disbursement 05 / 28 / 2020

FEC Identification Number C00546788

Transaction ID : BDA5C18E0E

Amount of Each Disbursement this Period 2500.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

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

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 2500.00 |
| TOTAL This Period (last page this line number only).....▶ | 5000.00 |