02/08/2005 08 : 20

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) — **USE FEC MAILING LABEL OR TYPE OR PRINT** ▼ — Example: If typing, type over the lines

American Dietetic Association PAC

ADDRESS (number and street) ▼ 1120 Connecticut Ave. NW

Suite 480

Check if different than previously reported. (ACC)

Washington | DC | 20036

2. **FEC IDENTIFICATION NUMBER** ▼ C00143560

CITY ▲ STATE ▲ ZIPCODE ▲

3. IS THIS REPORT — X NEW (N) **OR** AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On: X

Feb 20 (M2)	May 20 (M5)	Aug 20 (M8)	Nov 20 (M11) (Non-Election Year Only)
Mar 20 (M3)	Jun 20 (M6)	Sep 20 (M9)	Dec 20 (M12) (Non-Election Year Only)
Apr 20 (M4)	Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)

(c) 12-Day **PRE**-Election Report for the: Primary (12P) General (12G) Runoff (12R) Convention (12C) Special (12G)

Election on in the State of

(d) 30-Day **Post**-Election Report for the: General (30G) Runoff (30R) Special (30S)

Election on in the State of

5. Covering Period 01 01 2005 through 01 31 2005

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 M. Stephanie Patrick

Signature of Treasurer Electronically Filed by M. Stephanie Patrick Date 02 08 2005

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

Office Use Only							

FEC FORM 3X
(Rev. 02/2003)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name
American Dietetic Association PAC

Report Covering the Period: From: 01 01 2005 To: 01 31 2005

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 2005		84203.78
(b) Cash on Hand at Begining of Reporting Period	84203.78	
(c) Total Receipts (from Line 19)	25429.33	25429.33
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	109633.11	109633.11
7. Total Disbursements (from Line 31)	32226.09	32226.09
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	77407.02	77407.02
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00	

X 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. 02/2003)

Write or Type Committee Name

American Dietetic Association PAC

Report Covering the Period: From: 01 01 2005 To: 01 31 2005

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)	0.00	
(ii) Unitemized	25429.33	
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ▶	25429.33	25429.33
(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) ..... ▶	25429.33	25429.33
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	25429.33	25429.33
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	25429.33	25429.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating Expenditures	28174.59	28174.59
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)) ▶	28174.59	28174.59
22. Transfers to Affiliated/Other Party Committees	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees	4000.00	4000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	51.50	51.50
(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)) ▶	51.50	51.50
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	32226.09	32226.09
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)	32226.09	32226.09

DETAILED SUMMARY PAGE

of Disbursements

FEC **Form 3X** (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	25429.33	25429.33
34. Total Contribution Refunds (from Line 28(d))	51.50	51.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	25377.83	25377.83
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28174.59	28174.59
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	28174.59	28174.59

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b

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

NAME OF COMMITTEE (In Full)
American Dietetic Association PAC

A. Full Name (Last, First, Middle Initial)
Hotel Washington

Mailing Address 515 15th St., NW

City: Washington | State: DC | Zip Code: 20004

Purpose of Disbursement: fundraising event deposit

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1542
Date of Disbursement: 01 / 07 / 2005

Amount of Each Disbursement this Period: 500.00

B. Full Name (Last, First, Middle Initial)
Membership Marketing Services

Mailing Address Attn. Fran Carille
1280 Perimeter Parkway

City: Virginia Beach | State: VA | Zip Code: 23454-5680

Purpose of Disbursement: contracted telemarketing services

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1543
Date of Disbursement: 01 / 18 / 2005

Amount of Each Disbursement this Period: 27616.72

C. Full Name (Last, First, Middle Initial)
United Bank

Mailing Address 1667 K Street, NW

City: Washington | State: DC | Zip Code: 20006-1605

Purpose of Disbursement: bank service fee

Candidate Name

Category/Type

Office Sought: House / Senate / President

State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1561
Date of Disbursement: 01 / 12 / 2005

Amount of Each Disbursement this Period: 52.87

SUBTOTAL of Disbursements This Page (optional) ..... ▶ **28169.59**

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)

[X] 21b	[ ] 22	[ ] 23	[ ] 24	[ ] 25	[ ] 26
[ ] 27	[ ] 28a	[ ] 28b	[ ] 28c	[ ] 29	[ ] 30b

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NAME OF COMMITTEE (In Full)
American Dietetic Association PAC

A. Full Name (Last, First, Middle Initial)
United Bank

Mailing Address 1667 K Street, NW

City: Washington
State: DC
Zip Code: 20006-1605

Purpose of Disbursement
bank charge

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1555
Date of Disbursement
01 / 19 / 2005

Amount of Each Disbursement this Period
5.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶ 5.00

TOTAL This Period (last page this line number only) ..... ▶ 28174.59

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)

☐ 21b	☐ 22	☒ 23	☐ 24	☐ 25	☐ 26
☐ 27	☐ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Dietetic Association PAC

A. Full Name (Last, First, Middle Initial)
A Lot of People Who Support Jeff Bingaman

Mailing Address P.O. Box 16210

City: Albuquerque | State: NM | Zip Code: 87191

Purpose of Disbursement: Contr.

Candidate Name: Jeff Bingaman

Category/Type

Office Sought: House / X Senate / President — State: NM District:

Disbursement For: 2006 / X Primary / General / Other (specify)

Transaction ID: D1552
Date of Disbursement: 01 / 24 / 2005

Amount of Each Disbursement this Period: 2000.00

B. Full Name (Last, First, Middle Initial)
Carper for Senate

Mailing Address 19 East Commons Blvd Second Floor

City: New Castle | State: DE | Zip Code: 19720

Purpose of Disbursement: Contr.

Candidate Name: Thomas R. Carper

Category/Type

Office Sought: House / X Senate / President — State: DE District:

Disbursement For: 2006 / X Primary / General / Other (specify)

Transaction ID: D1549
Date of Disbursement: 01 / 24 / 2005

Amount of Each Disbursement this Period: 1000.00

C. Full Name (Last, First, Middle Initial)
Lee Terry for Congress

Mailing Address

City: Omaha | State: NE | Zip Code: 68154

Purpose of Disbursement: Contr.

Candidate Name: Lee Terry

Category/Type

Office Sought: X House / Senate / President — State: NE District: 02

Disbursement For: 2006 / X Primary / General / Other (specify)

Transaction ID: D1550
Date of Disbursement: 01 / 24 / 2005

Amount of Each Disbursement this Period: 1000.00

SUBTOTAL of Disbursements This Page (optional) ..... ▶	4000.00
TOTAL This Period (last page this line number only) ..... ▶	4000.00

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)

☐ 21b	☐ 22	☐ 23	☐ 24	☐ 25	☐ 26
☐ 27	☒ 28a	☐ 28b	☐ 28c	☐ 29	☐ 30b

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NAME OF COMMITTEE (In Full)
American Dietetic Association PAC

A.
Full Name (Last, First, Middle Initial)
Deborah J Herskowitz

Mailing Address Unit 31
130 Fillow St

City Norwalk
State CT
Zip Code 06850-2442

Purpose of Disbursement
returned check

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1553
Date of Disbursement 01 / 19 / 2005

Amount of Each Disbursement this Period
15.00

B.
Full Name (Last, First, Middle Initial)
Barbara Y Tidwell

Mailing Address 3930 Novaline Ln

City Jacksonville
State FL
Zip Code 32277-2247

Purpose of Disbursement
Refund to Individual

Candidate Name

Category/Type

Office Sought: House / Senate / President
State: District

Disbursement For: Primary / General / Other (specify)

Transaction ID: D1548
Date of Disbursement 01 / 21 / 2005

Amount of Each Disbursement this Period
36.50

SUBTOTAL of Disbursements This Page (optional) ..... ▶	51.50
TOTAL This Period (last page this line number only) ..... ▶	51.50