

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 Washington DC 20005-3934
Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE
C C00457754
3. IS THIS REPORT NEW OR AMENDED (N) (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 03/01/2024 through 03/31/2024

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 Djaouga, Contina, , ,

Signature of Treasurer Djaouga, Contina, , , Date 04/11/2024

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

**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="2024"/>		<input type="text" value="327272.48"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="262992.48"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="6370.00"/>	<input type="text" value="22110.00"/>
(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="269362.48"/>	<input type="text" value="349382.48"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="54510.00"/>	<input type="text" value="134530.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="214852.48"/>	<input type="text" value="214852.48"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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 the Federal Election Commission at 800-424-9530 or visit [www.fec.gov](http://www.fec.gov)**

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

U.S. Travel Association PAC

Report Covering the Period: From: 03 / 01 / 2024 To: 03 / 31 / 2024

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).....	240.00	390.00
(ii) Unitemized .....	130.00	720.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	370.00	1110.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	15000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	5370.00	16110.00
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.....	1000.00	6000.00
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)).....▶	6370.00	22110.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	6370.00	22110.00

**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 .....	10.00	30.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	10.00	30.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	54500.00	134500.00
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)) ..	54510.00	134530.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	54510.00	134530.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	5370.00	16110.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	5370.00	16110.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	10.00	30.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	10.00	30.00

# 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 17
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. 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 ▼ 270.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2024  
**Transaction ID : A3B43AC4795554EB7B5E**  
 Amount of Each Receipt this Period 90.00  
 Memo Item  
 Payroll Deduction: \$45.00/Bi-Weekly

**B. Hansen, Erik, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 New York Ave NW  
 Ste 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) SVP, Government Relations  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 03 / 31 / 2024  
**Transaction ID : A9795D26E13BE43AC946**  
 Amount of Each Receipt this Period 150.00  
 Memo Item  
 Payroll Deduction: \$75.00/Bi-Weekly

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	240.00
<b>TOTAL</b> This Period (last page this line number only).....	240.00

**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 17
<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**

**A. Enterprise Holdings Inc PAC**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 Corporate Park Drive  
 City Saint Louis State MO Zip Code 63105-4204  
 FEC ID number of contributing federal political committee. **C** C00219642  
 Name of Employer (for Individual) Occupation (for Individual)  
 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  
 03 / 11 / 2024  
**Transaction ID : ABB63D5E296E441AFA0F**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

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

<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: (check only one)	PAGE 8 OF 17
<input 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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**A. CATHY MCMORRIS RODGERS FOR CONGRESS**

Mailing Address 410 1st Street SE, 2nd Floor

City Washington	State DC	Zip Code 20003-1867
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FEC ID number of contributing federal political committee. **C** C00390476

Name of Employer (for Individual)	Occupation (for Individual)
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Receipt For: 2024  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
03	/	11	/	2024

**Transaction ID : A1B0CB8F205E24AC2B42**

Amount of Each Receipt this Period  
1000.00

Memo Item  
Refund of 12/15/2023 contribution

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

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  

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

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

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  

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1000.00
<b>TOTAL</b> This Period (last page this line number only).....	1000.00



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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

U.S. Travel Association PAC

Full Name (Last, First, Middle Initial)

A. ADRIAN SMITH FOR CONGRESS

Mailing Address 439 New Jersey Avenue SE

City Washington State DC Zip Code 20003-4034

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name

Smith, Adrian, , ,

Office Sought: House [checked], Senate, President. Disbursement For: 2024. Primary [checked], General, Other.

State: NE District: 03

Date of Disbursement

Date of Disbursement: 03 / 04 / 2024

FEC Identification Number

FEC ID: C00412890. Transaction ID: BD61EBD5D. Amount: 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. ALABAMA FIRST PAC

Mailing Address 1101 30th Street NW, Suite 390

City Washington State DC Zip Code 20007-3708

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name

ALABAMA FIRST PAC

Office Sought: House, Senate, President. Disbursement For: 2024. Other [checked], Primary, General.

State: District: Other

Date of Disbursement

Date of Disbursement: 03 / 28 / 2024

FEC Identification Number

FEC ID: C00821058. Transaction ID: BCD7284B8D. Amount: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Amodei for Nevada

Mailing Address 107 S. West Street #176

City Alexandria State VA Zip Code 22314-2824

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name

Amodei, Mark, , ,

Office Sought: House [checked], Senate, President. Disbursement For: 2024. General [checked], Primary, Other.

State: NV District: 02

Date of Disbursement

Date of Disbursement: 03 / 28 / 2024

FEC Identification Number

FEC ID: C00496760. Transaction ID: B9F7B30F8D. Amount: 2500.00

Memo Item

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

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

Summary amounts: 8500.00

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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Box 23 is checked.

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NAME OF COMMITTEE (In Full)

U.S. Travel Association PAC

Full Name (Last, First, Middle Initial)

A. CAPITO FOR WEST VIRGINIA

Date of Disbursement

Date selection: MM/DD/YYYY = 03/28/2024

Mailing Address 2308 Mount Vernon Ave, #707

City Alexandria State VA Zip Code 22301-1328

FEC Identification Number

C00539825

Purpose of Disbursement Contribution to Committee

011

Transaction ID : B03C3D01FE

Candidate Name Capito, Shelley, Moore, ,

Amount of Each Disbursement this Period

1500.00

Office Sought: House, Senate, President. Disbursement For: 2026. Primary checked.

Memo Item

Full Name (Last, First, Middle Initial)

B. Castor for Congress

Date of Disbursement

Date selection: MM/DD/YYYY = 03/04/2024

Mailing Address 322 17th St NE

City Washington State DC Zip Code 20002-6618

FEC Identification Number

C00410761

Purpose of Disbursement Contribution to Committee

011

Transaction ID : B150E4823D/

Candidate Name Castor, Kathy, , ,

Amount of Each Disbursement this Period

5000.00

Office Sought: House, Senate, President. Disbursement For: 2024. Primary checked.

Memo Item

Full Name (Last, First, Middle Initial)

C. CHC BOLD PAC

Date of Disbursement

Date selection: MM/DD/YYYY = 03/04/2024

Mailing Address PO Box 15096

City Washington State DC Zip Code 20003-0096

FEC Identification Number

C00365536

Purpose of Disbursement Contribution to Committee

011

Transaction ID : B2733DE9BE

Candidate Name CHC BOLD PAC

Amount of Each Disbursement this Period

5000.00

Office Sought: House, Senate, President. Disbursement For: 2024. Other checked.

Memo Item

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

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

11500.00

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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Box 23 is checked.

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

Form A: CISCOMANI FOR CONGRESS. Includes fields for Full Name, Mailing Address (2308 Mount Vernon Avenue #337), City (Alexandria), State (VA), Zip Code (22301-1328), Purpose of Disbursement (VOID - Contribution to Committee), Candidate Name (Ciscomani, Juan, . . .), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (-1000.00).

Form B: CISCOMANI FOR CONGRESS. Includes fields for Full Name, Mailing Address (2308 Mount Vernon Avenue #337), City (Alexandria), State (VA), Zip Code (22301-1328), Purpose of Disbursement (Contribution to Committee), Candidate Name (Ciscomani, Juan, . . .), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (1000.00).

Form C: CITIZENS TO ELECT RICK LARSEN. Includes fields for Full Name, Mailing Address (PO Box 636), City (Annandale), State (VA), Zip Code (22003-0636), Purpose of Disbursement (Contribution to Committee), Candidate Name (Larsen, Rick, . . .), Office Sought (House), Disbursement For (2024), and Amount of Each Disbursement (2000.00).

SUBTOTAL of Disbursements This Page (optional) 2000.00
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)

Form for line numbers 21b-28a, 22-28b, 23-28c, 26-29, 27-30b with checkboxes.

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NAME OF COMMITTEE (In Full)

U.S. Travel Association PAC

Full Name (Last, First, Middle Initial)

A. CONGRESSIONAL BLACK CAUCUS PAC

Mailing Address 1100 New Jersey Ave SE #2410

City Washington State DC Zip Code 20003-3302

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name CONGRESSIONAL BLACK CAUCUS PAC

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) Other

Date of Disbursement

Date of Disbursement form: MM / DD / YYYY (03 / 04 / 2024)

FEC Identification Number

C00147512

Transaction ID : B8D10B5D37

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. DIANA FOR CONGRESS

Mailing Address 410 1st Street SE 2nd Floor

City Washington State DC Zip Code 20003-1867

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name Harshbarger, Diana, , ,

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify)

Date of Disbursement

Date of Disbursement form: MM / DD / YYYY (03 / 04 / 2024)

FEC Identification Number

C00741090

Transaction ID : BB97A79973

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 2500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. EQUALITY PAC

Mailing Address 211 S Street NW

City Washington State DC Zip Code 20001-1832

Purpose of Disbursement Contribution to Committee Category/Type 011

Candidate Name EQUALITY PAC

Office Sought: House Senate President Disbursement For: 2024 Primary General Other (specify) Other

Date of Disbursement

Date of Disbursement form: MM / DD / YYYY (03 / 04 / 2024)

FEC Identification Number

C00550970

Transaction ID : B212426457

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period form: 2500.00

Memo Item

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

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

SUBTOTAL form: 10000.00

TOTAL form: 10000.00

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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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

Form A: FRIENDS OF DAVE JOYCE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: GARRET GRAVES FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: HERN FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

SUBTOTAL of Disbursements This Page (optional) 3000.00
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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

U.S. Travel Association PAC

Full Name (Last, First, Middle Initial)

A. JIMMY GOMEZ FOR CONGRESS

Mailing Address PO Box 15180

City Washington

State DC

Zip Code 20003-0180

Purpose of Disbursement

Contribution to Committee

011

Candidate Name

Gomez, Jimmy, , ,

Category/Type

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

State: CA District: 34

Date of Disbursement

Date of Disbursement: 03 / 04 / 2024

FEC Identification Number

C00629659

Transaction ID : BB77A3D86C

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. JONI ERNST FOR US SENATE INC

Mailing Address 1101 30th Street NW, Suite 390

City Washington

State DC

Zip Code 20007-3708

Purpose of Disbursement

Contribution to Committee

011

Candidate Name

Ernst, Joni, K, ,

Category/Type

Office Sought: [ ] House [X] Senate [ ] President

Disbursement For: 2026 [X] Primary [ ] General [ ] Other (specify) v

State: IA District:

Date of Disbursement

Date of Disbursement: 03 / 28 / 2024

FEC Identification Number

C00546788

Transaction ID : B78662CDEC

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 1500.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. LATTA FOR CONGRESS

Mailing Address 5827 Colfax Ave.

City Alexandria

State VA

Zip Code 22311-1013

Purpose of Disbursement

Contribution to Committee

011

Candidate Name

Latta, Bob, , ,

Category/Type

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) v

State: OH District: 05

Date of Disbursement

Date of Disbursement: 03 / 04 / 2024

FEC Identification Number

C00438697

Transaction ID : BB8863A1E0

Amount of Each Disbursement this Period

Amount of Each Disbursement this Period: 2500.00

[ ] Memo Item

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

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

SUBTOTAL: 5000.00

TOTAL: 5000.00

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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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

Form A: PETERS FOR MICHIGAN. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: PETERS FOR MICHIGAN. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Pingree For Congress. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

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)

Form for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)

U.S. Travel Association PAC

Full Name (Last, First, Middle Initial)

A. Pingree For Congress

Mailing Address PO Box 17613

City Portland

State ME

Zip Code 04112-8613

Purpose of Disbursement VOID - Contribution to Committee

Category/Type 011

Candidate Name

Pingree, Chellie, . .

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) ▼

State: ME District: 01

Date of Disbursement

Date: 03 / 07 / 2024

FEC Identification Number

C00433391

Transaction ID : B16B3AA031

Amount of Each Disbursement this Period

- 1000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

B. REPUBLICAN MAINSTREET PARTNERSHIP PAC

Mailing Address 411 New Jersey Ave SE

City Washington

State DC

Zip Code 20003-4007

Purpose of Disbursement Contribution to Committee

Category/Type 011

Candidate Name

REPUBLICAN MAINSTREET PARTNERSHIP PAC

Office Sought: [ ] House [ ] Senate [ ] President

Disbursement For: 2024 [ ] Primary [ ] General [X] Other (specify) Other

State: District:

Date of Disbursement

Date: 03 / 04 / 2024

FEC Identification Number

C00165159

Transaction ID : B1D28BE021

Amount of Each Disbursement this Period

5000.00

[ ] Memo Item

Full Name (Last, First, Middle Initial)

C. SMUCKER FOR CONGRESS

Mailing Address 5827 Colfax Avenue

City Alexandria

State VA

Zip Code 22311-1013

Purpose of Disbursement Contribution to Committee

Category/Type 011

Candidate Name

Smucker, Lloyd, . .

Office Sought: [X] House [ ] Senate [ ] President

Disbursement For: 2024 [X] Primary [ ] General [ ] Other (specify) ▼

State: PA District: 11

Date of Disbursement

Date: 03 / 04 / 2024

FEC Identification Number

C00599464

Transaction ID : B098F92C0C

Amount of Each Disbursement this Period

1000.00

[ ] Memo Item

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

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

5000.00



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)

Grid for line numbers: 21b, 22, 23, 24, 25, 26, 27, 28a, 28b, 28c, 29, 30b. Box 23 is checked.

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

Form A: SMUCKER FOR CONGRESS. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form B: VALUE IN ELECTING WOMEN (VIEW PAC). Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Form C: Empty form with fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement.

Summary table with two rows: SUBTOTAL of Disbursements This Page (optional) and TOTAL This Period (last page this line number only).