

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
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

ADDRESS (number and street) 110 N ROYAL STREET
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00373910
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 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 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 06 01 2009 through 06 30 2009

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 Shane Downey

Signature of Treasurer Electronically Filed by Shane Downey Date 07 16 2009

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. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		58515.82
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	60752.36									
(c) Total Receipts (from Line 19)	5671.27	21215.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66423.63	79731.43								
7. Total Disbursements (from Line 31)	10220.03	23527.83								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	56203.60	56203.60								
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									

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

Write or Type Committee Name

NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

Report Covering the Period: From: To:

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)	2482.10	6640.21
(ii) Unitemized	3189.17	14575.40
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5671.27	21215.61
(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)	5671.27	21215.61
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	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))	5671.27	21215.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5671.27	21215.61

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.....	570.03	1377.83
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	570.03	1377.83
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	22000.00
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	150.00	150.00
(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))	150.00	150.00
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))..	10220.03	23527.83
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10220.03	23527.83

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	5671.27	21215.61
34. Total Contribution Refunds (from Line 28(d))	150.00	150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5521.27	21065.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	570.03	1377.83
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	570.03	1377.83

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 14

(check only one)

<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

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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)
Mr. Peter M. Browne

Mailing Address 3250 E Layton Ave.

City State Zip Code
Cudahy WI 53110

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

Name of Employer Occupation
Carey Limousine of Wisconsin President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 0 4 / 2 0 0 9

Transaction ID: 2263

Amount of Each Receipt this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
Ms. Suzanne M. Fletcher

Mailing Address PO Box 9777, MD NP 310
2211 E, Calhoun St.

City State Zip Code
Federal Way WA 98063

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

Name of Employer Occupation
Weyerhaeuser Director of Travel & Meetings

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 300.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 5 / 2 0 0 9

Transaction ID: 2232

Amount of Each Receipt this Period

300.00

C.

Full Name (Last, First, Middle Initial)
William A. Hagel

Mailing Address 70 Amboy Avenue

City State Zip Code
Woodbridge NJ 07095

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

Name of Employer Occupation
Gem Limousine Worldwide VP Sales & Client Services

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 6 / 1 2 / 2 0 0 9

Transaction ID: 2171

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)

1450.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Mr. Zane Kerby		Date of Receipt	
	Mailing Address 8657 White Beech Way		M M / D D / Y Y Y Y Y 06 / 15 / 2009	
	City	State	Zip Code	Transaction ID: 2236
	Vienna	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.83	
Name of Employer NBTA		Occupation Sr. Director, Business & Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.13		

B.	Full Name (Last, First, Middle Initial) Mr. Zane Kerby		Date of Receipt	
	Mailing Address 8657 White Beech Way		M M / D D / Y Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	Transaction ID: 2257
	Vienna	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		20.83	
Name of Employer NBTA		Occupation Sr. Director, Business & Development		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 249.96		

C.	Full Name (Last, First, Middle Initial) Thomas Klein		Date of Receipt	
	Mailing Address 2365 Nantucket Drive		M M / D D / Y Y Y Y Y 06 / 06 / 2009	
	City	State	Zip Code	Transaction ID: 2264
	Salt Lake City	UT	84121	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		10.00	
Name of Employer CHG Healthcare Services		Occupation Supervisor, Travel		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 235.00		

SUBTOTAL of Receipts This Page (optional)	▶	51.66
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: (check only one)	PAGE 8 / 14
	<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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Flodine Lee		Date of Receipt MM / DD / YYYY 06 / 10 / 2009		
	Mailing Address 2850 Stinton Way		Transaction ID: 2166		
	City Klamath Falls	State OR	Zip Code 97603	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer JELD-WEN	Occupation Corporate Travel Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

B.	Full Name (Last, First, Middle Initial) James P. McMullan		Date of Receipt MM / DD / YYYY 06 / 04 / 2009		
	Mailing Address 2475 Moss Drive		Transaction ID: 2203		
	City BARNHART	State MO	Zip Code 63012	Amount of Each Receipt this Period 134.60	
	FEC ID number of contributing federal political committee. C				
	Name of Employer Monsanto	Occupation Travel Manager			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 442.36			

C.	Full Name (Last, First, Middle Initial) Pamela J McTeer		Date of Receipt MM / DD / YYYY 06 / 10 / 2009		
	Mailing Address P. O. Box 4030 - BC500		Transaction ID: 2163		
	City Golden	State CO	Zip Code 80401	Amount of Each Receipt this Period 150.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer MillerCoors	Occupation Manager Strategic Sourcing			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00			

SUBTOTAL of Receipts This Page (optional)	▶	534.60
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 14
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Mr. Henry J. (Hank) Roeder		Date of Receipt	
	Mailing Address 1814 Saint Roman Dr		M M / D D / Y Y Y Y Y 06 / 15 / 2009	
	City	State	Zip Code	Transaction ID: 2238
	Vienna	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.92	
Name of Employer National Business Travel Association		Occupation Vice President, Domestic & Internation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 802.12		

B.	Full Name (Last, First, Middle Initial) Mr. Henry J. (Hank) Roeder		Date of Receipt	
	Mailing Address 1814 Saint Roman Dr		M M / D D / Y Y Y Y Y 06 / 30 / 2009	
	City	State	Zip Code	Transaction ID: 2259
	Vienna	VA	22182	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		72.92	
Name of Employer National Business Travel Association		Occupation Vice President, Domestic & Internation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 875.04		

C.	Full Name (Last, First, Middle Initial) Adi Sidhwa		Date of Receipt	
	Mailing Address 250 W 49th Street Suite 302		M M / D D / Y Y Y Y Y 06 / 04 / 2009	
	City	State	Zip Code	Transaction ID: 2158
	New York	NY	10019	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		150.00	
Name of Employer Andaz Wall Street		Occupation Director of Sales & Mrkt.		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

SUBTOTAL of Receipts This Page (optional)	295.84
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 10 / 14
(check only one)

<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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)
Mark Ziegler

Mailing Address 45 Newton Street

City	State	Zip Code
SAN FRANCISCO	CA	94112

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

Name of Employer Atmel Corporation	Occupation Corporate Travel Manager
---------------------------------------	--

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	0	9

Transaction ID: 2227

Amount of Each Receipt this Period

150.00

SUBTOTAL of Receipts This Page (optional)	▶	150.00
TOTAL This Period (last page this line number only)	▶	2482.10

**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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Edonation.com	Transaction ID: 2268 Date of Disbursement 06 / 30 / 2009
	Mailing Address 118 N. Saint Asaph Street	Amount of Each Disbursement this Period 2.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement credit card processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Edonation.com	Transaction ID: 2269 Date of Disbursement 06 / 30 / 2009
	Mailing Address 118 N. Saint Asaph Street	Amount of Each Disbursement this Period 142.50
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement credit card processing fee	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) Suntrust	Transaction ID: 2279 Date of Disbursement 06 / 30 / 2009
	Mailing Address 110 North Royal Street	Amount of Each Disbursement this Period 90.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement Bank service charge	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	234.50
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)

PAGE 12 / 14

<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)

NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)

Suntrust

Mailing Address 110 North Royal Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Credit card processing fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 2280

Date of Disbursement

06 / 30 / 2009

Amount of Each Disbursement this Period

335.53

SUBTOTAL of Disbursements This Page (optional)

335.53

TOTAL This Period (last page this line number only)

570.03

**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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) CLARKE FOR CONGRESS	Transaction ID: 2241 Date of Disbursement 06 / 10 / 2009
	Mailing Address 111-36 200TH STREET	Amount of Each Disbursement this Period 500.00
	City HOLLIS State NY Zip Code 11412	
	Purpose of Disbursement	Category/Type
	Candidate Name YVETTE CLARKE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DINA TITUS FOR CONGRESS	Transaction ID: 2253 Date of Disbursement 06 / 23 / 2009
	Mailing Address P. O. Box 50614 Suite C5	Amount of Each Disbursement this Period 1000.00
	City Henderson State NV Zip Code 89016	
	Purpose of Disbursement Political Contributions	Category/Type
	Candidate Name DINA TITUS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LUNGREN FOR CONGRESS	Transaction ID: 2242 Date of Disbursement 06 / 10 / 2009
	Mailing Address 9321 Silverbend Lane	Amount of Each Disbursement this Period 2000.00
	City Elk Grove State CA Zip Code 95624	
	Purpose of Disbursement	Category/Type
	Candidate Name DANIEL E. LUNGREN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 34	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3500.00
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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) PASCRELL FOR CONGRESS	Transaction ID: 2252
	Mailing Address P.O. Box 640	Date of Disbursement 06 / 30 / 2009
	City Totowa State NJ Zip Code 07511	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	Category/ Type
	Candidate Name WILLIAM J. HON. JR. PASCRELL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 08	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) SCHMIDT FOR CONGRESS COMMITTEE	Transaction ID: 2254
	Mailing Address 771 Wards Corner Rd	Date of Disbursement 06 / 23 / 2009
	City Loveland State OH Zip Code 45140	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Political Contributions	Category/ Type
	Candidate Name JEANNETTE H SCHMIDT	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 02	
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

6000.00

TOTAL This Period (last page this line number only)

9500.00