



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>	<input type="text" value="133070.01"/>	<input type="text" value="133070.01"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="190216.03"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="45811.66"/>	<input type="text" value="298778.28"/>
(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="236027.69"/>	<input type="text" value="431848.29"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="59425.21"/>	<input type="text" value="255245.81"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="176602.48"/>	<input type="text" value="176602.48"/>
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:**

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. 06/2004)

Write or Type Committee Name

**U.S. Travel Association PAC**

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).....	37966.66	244168.28
(ii) Unitemized .....	720.00	7485.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	38686.66	251653.28
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	42500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	43686.66	294153.28
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.....	2125.00	4625.00
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))..... ▶	45811.66	298778.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	45811.66	298778.28

**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 .....	6845.21	7155.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6845.21	7155.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	49000.00	242670.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	3580.00	5420.00
(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)).....	3580.00	5420.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	59425.21	255245.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	59425.21	255245.81

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	43686.66	294153.28
34. Total Contribution Refunds (from Line 28(d)) .....	3580.00	5420.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	40106.66	288733.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6845.21	7155.81
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6845.21	7155.81

**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 28
	<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**

Full Name (Last, First, Middle Initial)  
**A. Josephine Ferguson**

Mailing Address 1922 Armstrong Drive

City Lansdale State PA Zip Code 19446-5639

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

Name of Employer Occupation  
Retired Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
08 / 01 / 2014  
**Transaction ID : A0A47B769D80E479EB08**

Amount of Each Receipt this Period  
1000.00

Full Name (Last, First, Middle Initial)  
**B. Mr. John P Ferguson**

Mailing Address 1922 Armstrong Dr

City Lansdale State PA Zip Code 19446-5639

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

Name of Employer Occupation  
Philadelphia Conv. & Visitors Bureau President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
5000.00

Date of Receipt  
08 / 01 / 2014  
**Transaction ID : A8026DDD7012845BCB95**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Leila George-Wheeler**

Mailing Address 614 Elliott St NE  
Apt. 1B

City Washington State DC Zip Code 20002-5456

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

Name of Employer Occupation  
Holland & Knight Associate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
08 / 01 / 2014  
**Transaction ID : AD81A4FF30F1D4C9D978**

Amount of Each Receipt this Period  
350.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	6350.00
<b>TOTAL</b> 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 28  
(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. Rob Gluck**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1462 Waverly Rd  
 City San Marino State CA Zip Code 91108-2013  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer High Lantern Group Occupation Managing Partner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014  
**Transaction ID : AF2776BDAB6A9455CAF4**  
 Amount of Each Receipt this Period  
 300.00

**B. Denise Medved**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5115 Ravensworth Road  
 City Arlington State VA Zip Code 22203  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer The Tiny Kitchen Occupation Chief Executive Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014  
**Transaction ID : A5AF3ADC31C9F4DA6AE2**  
 Amount of Each Receipt this Period  
 2000.00

**C. Mr. Christopher L. Thompson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 8515 Congressional Dr  
 City Tallahassee State FL Zip Code 32312-4019  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Brand USA Occupation President & Chief Executive Officer  
 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  
 08 / 01 / 2014  
**Transaction ID : A9FB3162A101449DAB9A**  
 Amount of Each Receipt this Period  
 5000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 7300.00  
**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 8 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. Susan Thompson**

Mailing Address 8515 Congressional Drive

City State Zip Code  
Tallahassee FL 32312-4019

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

Name of Employer Occupation  
Smith, Thompson, Shaw, Minacci & Coln Attorney

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
750.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 01 / 2014

**Transaction ID : A58C19F42041D4496BFF**

Amount of Each Receipt this Period  
750.00

Full Name (Last, First, Middle Initial)  
**B. Jonathan Grella**

Mailing Address 3519 Turner Ln

City State Zip Code  
Chevy Chase MD 20815-3213

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

Name of Employer Occupation  
U.S. Travel Association Senior Vice President, Public Affairs

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  
 08 / 04 / 2014

**Transaction ID : AFDB5B7BB9EC446C79FD**

Amount of Each Receipt this Period  
5000.00

Full Name (Last, First, Middle Initial)  
**C. Evelyn Ireland**

Mailing Address 362 Rio Bravo Drive

City State Zip Code  
McKinney TX 75069-4194

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

Name of Employer Occupation  
National Assn. of Dental Plans Executive Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
900.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 08 / 04 / 2014

**Transaction ID : A5F5592335C4A483A9E8**

Amount of Each Receipt this Period  
900.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 6650.00

**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 9 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. Patrick Kaler**

Mailing Address 146 Bryant St

City Buffalo State NY Zip Code 14222-2003

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

Name of Employer Visit Buffalo Niagara Occupation President & Chief Executive Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : A1CBE3D3A59E246D89FA**

Amount of Each Receipt this Period  
**400.00**

Full Name (Last, First, Middle Initial)  
**B. Barbara Logan**

Mailing Address 9304 Warren St

City Silver Spring State MD Zip Code 20910-1243

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

Name of Employer U S Travel Association Occupation Vice President, Meetings

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **465.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : A9CDEFB1B819F4280A57**

Amount of Each Receipt this Period  
**300.00**

Full Name (Last, First, Middle Initial)  
**C. Djenane Marchand**

Mailing Address 3548 N. Dickerson Street

City Arlington State VA Zip Code 22207-2908

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

Name of Employer U.S. Travel Association Occupation Senior Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : A4D7AC4BC03AD4E51A3B**

Amount of Each Receipt this Period  
**550.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **890.00**

**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 10 OF 28
<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)  
**U.S. Travel Association PAC**

**A. David Mimm**  
Full Name (Last, First, Middle Initial)

Mailing Address 4515 Edsall Dr

City Woodbridge State VA Zip Code 22193-3139

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

Name of Employer U.S. Travel Association Occupation Vice President, Finance

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **375.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : A88F43506062045E489F**

Amount of Each Receipt this Period  
**375.00**

**B. Michelle Tuffin**  
Full Name (Last, First, Middle Initial)

Mailing Address 5904 Ashby Manor PI

City Alexandria State VA Zip Code 22310-2267

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

Name of Employer U.S. Travel Association Occupation General Counsel

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2000.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 04 / 2014  
**Transaction ID : A422B4CEE81834AFC954**

Amount of Each Receipt this Period  
**2000.00**

**C. Mr. Scott White**  
Full Name (Last, First, Middle Initial)

Mailing Address 72178 Andalusia Ct

City Rancho Mirage State CA Zip Code 92270-3930

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

Name of Employer Palm Springs Conv. & Visitors Bureau Occupation President & Chief Executive Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1650.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 05 / 2014  
**Transaction ID : AD2BB2C561C594DF2A9C**

Amount of Each Receipt this Period  
**1650.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>4025.00</b>
<b>TOTAL</b> 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 11 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. Michael Jacobson**

Mailing Address 1200 N Veitch St  
Apt 746

City Arlington State VA Zip Code 22201-5828

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

Name of Employer U. S. Travel Association Occupation Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
560.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A120FD095464F4150B33**

Amount of Each Receipt this Period  
550.00

Full Name (Last, First, Middle Initial)  
**B. Duane Parrish**

Mailing Address 2804 Sunchaser Lane

City Mount Pleasant State SC Zip Code 29466-7986

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

Name of Employer SC Dept. of Parks, Rec. & Tourism Occupation Director

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1100.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : A5750AF934CF64F22B66**

Amount of Each Receipt this Period  
1100.00

Full Name (Last, First, Middle Initial)  
**c. Charles Greg Staley**

Mailing Address 2831 Chancellors Way NE

City Washington State DC Zip Code 20017-1407

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

Name of Employer U. S. Travel Association Occupation VP, Communications

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 06 / 2014

**Transaction ID : AE615C040927F4BB0A50**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1950.00

**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 12 OF 28
<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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial) <b>A. Annice Wooden</b>		Date of Receipt MM / DD / YYYY 08 / 07 / 2014
Mailing Address 6104 Edinburgh Ct		<b>Transaction ID : AA7D35AA7044F41B2B61</b>
City Agoura Hills	State CA	Zip Code 91301-4141
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 750.00	
Name of Employer Retired	Occupation Retired	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B. Ms. Amanda Hite</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014
Mailing Address 106 Havenwood Court		<b>Transaction ID : AFBEE3ABC3F2B4558B29</b>
City Hendersonville	State TN	Zip Code 37075-7208
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 2000.00	
Name of Employer Smith Travel Research	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2000.00	

Full Name (Last, First, Middle Initial) <b>C. Joseph Terzi</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2014
Mailing Address 17705 Old Winery Ct		<b>Transaction ID : A4603760EBBF04B5DBC6</b>
City Poway	State CA	Zip Code 92064-1058
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 900.00	
Name of Employer San Diego Tourism Authority	Occupation President & Chief Executive Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3650.00
<b>TOTAL</b> 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 13 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. Brad Smyth**

Mailing Address 1910 W Saint Johns Ave

City Austin State TX Zip Code 78757-2241

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

Name of Employer State of Texas, Office of the Governor Occupation Director of Tourism

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 10 / 2014  
**Transaction ID : A200F27922C834B21828**

Amount of Each Receipt this Period 300.00

Full Name (Last, First, Middle Initial)  
**B. David Nostrand**

Mailing Address 1420 Celesta Court

City Vienna State VA Zip Code 22182-1602

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

Name of Employer Marriott International Occupation Vice President, Sales

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 11 / 2014  
**Transaction ID : A41156FBB27C949E6B4E**

Amount of Each Receipt this Period 300.00

Full Name (Last, First, Middle Initial)  
**C. Eric Weber**

Mailing Address 3404 Miller Heights Rd

City Oakton State VA Zip Code 22124-1924

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

Name of Employer U.S. Travel Association Occupation Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 12 / 2014  
**Transaction ID : AF34AB013F29B4427AEE**

Amount of Each Receipt this Period 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 900.00

**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 14 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. Robert Elliott**

Mailing Address 194 Webster Way

City Henderson State NV Zip Code 89074-0622

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

Name of Employer Las Vegas Conv. & Visitors Authority Occupation Senior VP, Public Affairs

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **08 / 22 / 2014**

**Transaction ID : ADAB54A7B58D745AFA41**

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**B. Cathy Tull**

Mailing Address 998 Pleasing Plateau St

City Henderson State NV Zip Code 89002-3322

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

Name of Employer Las Vegas Conv. & Visitors Auth. Occupation Sr Vice President, Marketing

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt **08 / 22 / 2014**

**Transaction ID : AE026C23196B049E6A8B**

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

Full Name (Last, First, Middle Initial)  
**C. Mr. Rich Maradić**

Mailing Address 207 Lynwood Blvd

City Nashville State TN Zip Code 37205-2905

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

Name of Employer nSight for Travel Occupation Chief Executive Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2830.00**

Date of Receipt **08 / 25 / 2014**

**Transaction ID : AAFB0EDA3C01245CFA34**

Amount of Each Receipt this Period **2830.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **2930.00**

**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 15 OF 28
<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)  
**U.S. Travel Association PAC**

**A. Mr Steve Moore**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2531 E Vogel Ave  
City Phoenix State AZ Zip Code 85028-4729  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Visit Phoenix Occupation President & Chief Executive Officer  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1750.00**

Date of Receipt **08 / 25 / 2014**  
**Transaction ID : A1550275B526E474895C**  
Amount of Each Receipt this Period **875.00**

**B. Dennis Castleman**  
Full Name (Last, First, Middle Initial)  
Mailing Address 8379 Sweet Cherry Ln  
City Laurel State MD Zip Code 20723-1070  
FEC ID number of contributing federal political committee. **C**  
Name of Employer U S Travel Association Occupation Vice Pres. Industry Relations  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1160.00**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : AAF37D637A41C43C3B26**  
Amount of Each Receipt this Period **160.00**  
Payroll Deduction: \$80.00/Bi-Weekly

**C. Erik Hansen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 614 Elliott St NE Apt 1B  
City Washington State DC Zip Code 20002-5456  
FEC ID number of contributing federal political committee. **C**  
Name of Employer U.S. Travel Association Occupation Senior Director, Domestic Policy  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **1000.00**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : AF18E6C1FE0BC48349E2**  
Amount of Each Receipt this Period **1000.00**  
Payroll Deduction: \$500.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>2035.00</b>
<b>TOTAL</b> 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 16 OF 28
	<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. Timothy C Kennedy**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1834 Massachusetts Ave. SE  
 City Washington State DC Zip Code 20003-2530  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Director, Communications  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **320.00**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : A519CEE25EF374823ACF**  
 Amount of Each Receipt this Period **40.00**  
 Payroll Deduction: \$20.00/Bi-Weekly

**B. Barbara Logan**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9304 Warren St  
 City Silver Spring State MD Zip Code 20910-1243  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U S Travel Association Occupation Vice President, Meetings  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **485.00**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : A7F257F18FF7F44AEBF4**  
 Amount of Each Receipt this Period **20.00**  
 Payroll Deduction: \$10.00/Bi-Weekly

**C. Gary Oster**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1922 Eamons Way  
 City Annapolis State MD Zip Code 21401-3196  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer U.S. Travel Association Occupation Executive Vice President  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **3333.28**

Date of Receipt **08 / 29 / 2014**  
**Transaction ID : A2A45A1A146EA494481B**  
 Amount of Each Receipt this Period **416.66**  
 Payroll Deduction: \$208.33/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>476.66</b>
<b>TOTAL</b> 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 17 OF 28
	<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)  
**U.S. Travel Association PAC**

**A. Patricia Rojas-Ungar**  
Full Name (Last, First, Middle Initial)

Mailing Address 5441 32nd Street NW

City Washington State DC Zip Code 20015-1357

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

Name of Employer U.S. Travel Association Occupation VP, Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **690.00**

Date of Receipt **08 / 29 / 2014**

**Transaction ID : A02B4223008AE46D5A83**

Amount of Each Receipt this Period **690.00**

Payroll Deduction: \$345.00/Bi-Weekly

**B. Malcolm Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address 5205 14th St NW

City Washington State DC Zip Code 20011-6929

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

Name of Employer U S Travel Association Occupation Vice President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2210.00**

Date of Receipt **08 / 29 / 2014**

**Transaction ID : A8588F28C79274C1A9B8**

Amount of Each Receipt this Period **20.00**

Payroll Deduction: \$10.00/Bi-Weekly

**C. Courtney Temple**  
Full Name (Last, First, Middle Initial)

Mailing Address 420 16th St SE Apt 107

City Washington State DC Zip Code 20003-2427

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

Name of Employer U.S. Travel Association Occupation Director, Government Relations

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **08 / 29 / 2014**

**Transaction ID : A8050F739B6F347A788F**

Amount of Each Receipt this Period **50.00**

Payroll Deduction: \$25.00/Bi-Weekly

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>760.00</b>
<b>TOTAL</b> 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 18 OF 28  
(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)  
**U.S. Travel Association PAC**

**A. Vail Brown**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2440 Eastland Ave  
City Nashville State TN Zip Code 37206-1134  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Smith Travel Research Occupation VP, Global Bus. Develop. & Marketing  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 30 / 2014  
**Transaction ID : A61475C29868F42AB98F**  
Amount of Each Receipt this Period  
50.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	37966.66

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

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

FOR LINE NUMBER: PAGE 19 OF 28  
(check only one)

<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 (Last, First, Middle Initial)  
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 Occupation  
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  
08 / 08 / 2014  
**Transaction ID : AF6AA4AC6DB7945FDB04**  
Amount of Each Receipt this Period  
5000.00

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

<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: PAGE 20 OF 28  
(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input checked="" 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. Cantor For Congress**  
Full Name (Last, First, Middle Initial)  
Mailing Address 209 Pennsylvania Avenue, SE  
City Washington State DC Zip Code 20003-1107  
FEC ID number of contributing federal political committee. **C** C00355461  
Name of Employer Occupation  
Receipt For:  
 Primary  General  
 Other (specify) ▼  
Aggregate Year-to-Date ▼ 2125.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
08 / 13 / 2014  
**Transaction ID : A940FC96B0CC14D70B8A**  
Amount of Each Receipt this Period  
2125.00  
Refund of Contribution to General 14 Made on 4/23/13

**B.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

**C.**  
Full Name (Last, First, Middle Initial)  
Mailing Address  
City State Zip Code  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Occupation  
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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	2125.00
<b>TOTAL</b> This Period (last page this line number only).....▶	2125.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

Full Name (Last, First, Middle Initial)

**A. PNC Bank**

Mailing Address 1100 H St NW

City Washington State DC Zip Code 20005-5476

Purpose of Disbursement  
Bank Fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

**Transaction ID : BF9B77C481A6B440A86F**

Amount of Each Disbursement this Period

96.88

Full Name (Last, First, Middle Initial)

**B. U.S. Travel Association**

Mailing Address 1100 New York Ave NW

City Washington State DC Zip Code 20005-3918

Purpose of Disbursement  
1/3 Rule Reimbursement- Fundraising Prize Value

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : BE9660AE10F844EE38B2**

Amount of Each Disbursement this Period

6748.33

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

6845.21

6845.21

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. FIRST STATE PAC**

Mailing Address 303 Massachusetts Ave NE

City Washington State DC Zip Code 20002-5701

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) Other2014

State: District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

Transaction ID : B43A4D02BAC3B4627854

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SHAHEEN FOR SENATE COMMITTEE**

Mailing Address 2 1/2 BEACON STREET

City CONCORD State NH Zip Code 03301

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Sen. Jeanne Shaheen**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NH District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

Transaction ID : BD9ACBD75CA234CDCBC

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. WYDEN FOR SENATE**

Mailing Address P.O. Box 3498

City Portland State OR Zip Code 97208-3498

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Sen. Ron Wyden**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OR District:

Date of Disbursement

MM / DD / YYYY  
08 / 04 / 2014

Transaction ID : B1ECD3A11B90D4C4880D

Amount of Each Disbursement this Period

2500.00

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

10000.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. BILL SHUSTER FOR CONGRESS**

Mailing Address 104 Hume Avenue

City Alexandria State VA Zip Code 22301-1015

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Rep. Bill F. Shuster**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: PA District: 09

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

Transaction ID : **B6EBDC336BABC4C7699B**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. CAPITO FOR WEST VIRGINIA**

Mailing Address 1006 Pendleton Street

City Alexandria State VA Zip Code 22314-1837

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Shelley Moore Capito**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WV District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

Transaction ID : **B4B0F692EBE684048969**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. FOLLOW THE NORTH STAR FUND**

Mailing Address 10 G Street NE  
Suite 570

City Washington State DC Zip Code 20002-4268

Purpose of Disbursement  
Political Contribution

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

Transaction ID : **BF4DAB09ED44E4864A17**

Amount of Each Disbursement this Period

5000.00

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

12500.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. FREEDOM PROJECT; THE**

Mailing Address 320 1ST STREET SE

City Washington State DC Zip Code 20003-1838

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼  
Other2014

State:

District:

Date of Disbursement

/  /

**Transaction ID : B67CB950EBFDA48BFBCB**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. LOBIONDO FOR CONGRESS**

Mailing Address c/o Carole Goeas & Associates  
1707 Prince St. #5

City Alexandria State VA Zip Code 22314-2804

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name

**Rep. Frank A. LoBiondo**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ

District: 02

Date of Disbursement

/  /

**Transaction ID : BD1FDA377F41247178E1**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. MONTANANS FOR TESTER**

Mailing Address 236 Massachusetts Avenue NE  
Suite 207

City Washington State DC Zip Code 20002-4980

Purpose of Disbursement  
Political Contribution

**011**  
Category/  
Type

Candidate Name

**Sen. Jon Tester**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2018  
 Primary  General  
 Other (specify) ▼

State: MT

District:

Date of Disbursement

/  /

**Transaction ID : B1F8077126689414F9CB**

Amount of Each Disbursement this Period

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

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. Texans For Henry Cuellar Congressional Campaign**

Mailing Address 236 Massachusetts Ave NE  
Suite 207

City Washington State DC Zip Code 20002-4980

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Rep. Henry R. Cuellar**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: TX District: 28

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 13 / 2014

**Transaction ID : B8D245D62B8ED478798B**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. CICILLINE COMMITTEE**

Mailing Address PO Box 9107

City Providence State RI Zip Code 02940-9107

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Rep. David N. Cicilline**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: RI District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2014

**Transaction ID : B832A1C0A2A7342268E9**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. LUCILLE ROYBAL-ALLARD FOR CONGRESS**

Mailing Address 6 E STREET, SE

City Washington State DC Zip Code 20003-2611

Purpose of Disbursement  
Political Contribution

011

Candidate Name

**Rep. Lucille Roybal-Allard**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 40

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 19 / 2014

**Transaction ID : BBF754F46CF994D338F0**

Amount of Each Disbursement this Period

2500.00

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

6500.00

**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)  
**U.S. Travel Association PAC**

Full Name (Last, First, Middle Initial)

**A. WELCH FOR CONGRESS**

Mailing Address PO BOX 1682

City BURLINGTON State VT Zip Code 05402

Purpose of Disbursement  
Political Contribution

011

Category/  
Type

Candidate Name

**Rep. Peter F. Welch**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: VT District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 27 / 2014

Transaction ID : B2B0A06853211436EBB5

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

2500.00

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

49000.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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. Annice Wooden**

Mailing Address 6104 Edinburgh Ct

City Agoura Hills State CA Zip Code 91301-4141

Purpose of Disbursement  
Refund of Contribution Made on 8/7/14

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : BC513815C797F4E4D9F8**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. Mr. Rich Maradik**

Mailing Address 207 Lynwood Blvd

City Nashville State TN Zip Code 37205-2905

Purpose of Disbursement  
Refund of Contribution made on 7/29/14

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : B59A49028457346B2A1A**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

Amount of Each Disbursement this Period

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

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