

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER
2006 JUL 27 A 7:34
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

Conference of National Park Concessioners
Political Action Committee

ADDRESS (number and street) 129 Park Street NE Suite B
Vienna VA 22180

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

C00163626

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

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

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

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

- (c) 12-Day PRE-Election Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on 07 / 06 / 2006 in the State of VA

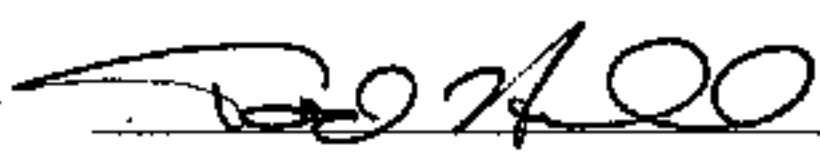
- (d) 30-Day POST-Election Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on 07 / 06 / 2006 in the State of VA

5. Covering Period 01 / 01 / 2006 through 06 / 30 / 2006

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 Tod Hull

Signature of Treasurer  Date 07 / 18 / 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

CONTACT

Report Covering the Period: From:

01 / 01 / 2006

To:

06 / 30 / 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2006		25,894.58
(b) Cash on Hand at Beginning of Reporting Period.....	25,894.58	
(c) Total Receipts (from Line 19).....	9,100.-	9,100.-
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	34,994.58	34,994.58
7. Total Disbursements (from Line 31).....	7,500.-	7,500.-
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	27,430.84	27,430.84
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	1.16	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	6,374	

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)

Page 3

Write or Type Committee Name

Con Pac

Report Covering the Period: From:

01 / 01 / 2006

To:

06 / 30 / 2006

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).....

9,100.-

9,100.-

(ii) Unitemized.....

0.-

0.-

(iii) TOTAL (add Lines 11(a)(i) and (ii).....▶

9,100.-

9,100.-

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

9,100.-

9,100.-

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

9,100.-

9,100.-

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

9,100.-

9,100.-

26039153196

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	7,500.-	7,500.-
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..		
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	7,500.-	7,500.-

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

9,100.-
0.-
9,100.-

9,100.-
0.-
9,100.-

26039153108

**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 1 OF 4

11a 11b 11c 12
13 14 15 16 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)

Conference of National Parks Concessioners PAC

Full Name (Last, First, Middle Initial)

A. Richard Burke

Mailing Address

85995 Slow Down Ln

City Veneta

State OR

Zip Code 97487

FEC ID number of contributing federal political committee.

C

Name of Employer

Guest Services, Inc.

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.-

Date of Receipt

03 / 21 / 2006

Amount of Each Receipt this Period

200.-

Full Name (Last, First, Middle Initial)

B. Ed Wimberly

Mailing Address

96 Martin Creek

City Kettle Falls

State WA

Zip Code 99141

FEC ID number of contributing federal political committee.

C

Name of Employer

Lake Roosevelt Marina

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.-

Date of Receipt

03 / 21 / 2006

Amount of Each Receipt this Period

250.-

Full Name (Last, First, Middle Initial)

C. Dave Woodside

Mailing Address

85 Ridgeway Dr.

City Bar Harbor

State ME

Zip Code 04609

FEC ID number of contributing federal political committee.

C

Name of Employer

Acacia Corp.

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.-

Date of Receipt

03 / 21 / 2006

Amount of Each Receipt this Period

250.-

SUBTOTAL of Receipts This Page (optional)

750.-

TOTAL This Period (last page this line number only)

750.-

**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 2 OF 4	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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NAME OF COMMITTEE (In Full)
Conference on National Park Concessioners PAC

A. **Joe Jassler**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **10002 N. 55th Str.**
 City: **Paradise Valley** State: **AZ** Zip Code: **85253**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Viac Corp.** Occupation:
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **1,000.-**

Date of Receipt: **03 / 21 / 2006**
 Amount of Each Receipt this Period: **1,000.-**

B. **Lee Harlow**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **Po Box 1437**
 City: **Hilo** State: **HI** Zip Code: **96721**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Hawaii Volcanoes, Inc.** Occupation:
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500.-**

Date of Receipt: **03 / 21 / 2006**
 Amount of Each Receipt this Period: **500.-**

C. **Carol Metzler**
 Full Name (Last, First, Middle Initial)
 Mailing Address: **7 Oak Drive**
 City: **Elizabethtown** State: **PA** Zip Code: **17022**
 FEC ID number of contributing federal political committee: **C**
 Name of Employer: **Gettysburg Tours, Inc.** Occupation:
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date: **500.-**

Date of Receipt: **03 / 21 / 2006**
 Amount of Each Receipt this Period: **500.-**

SUBTOTAL of Receipts This Page (optional): **2,000.-**
 TOTAL This Period (last page this line number only): **2,000.-**

20060321

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

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

FOR LINE NUMBER: PAGE 3 OF 4
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Conference of National Park Concessioners PAC

A. Full Name (Last, First, Middle Initial)
Paul Chandler
 Mailing Address
HC 30 Box 7
 City State Zip Code
Overton, NV 89040
 FEC ID number of contributing federal political committee.
C
 Name of Employer Occupation
Overton Marina
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
03 / 21 / 2006
 Amount of Each Receipt this Period
100.-
 Aggregate Year-to-Date
100.-

B. Full Name (Last, First, Middle Initial)
Phyllis Prevost
 Mailing Address
PO Box 749
 City State Zip Code
Waynesville, NC 28786
 FEC ID number of contributing federal political committee.
C
 Name of Employer Occupation
Pisgah Inn
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
03 / 21 / 2006
 Amount of Each Receipt this Period
150.-
 Aggregate Year-to-Date
150.-

C. Full Name (Last, First, Middle Initial)
Rex Maughan
 Mailing Address
PO Box 60773
 City State Zip Code
Phoenix, AZ 85082
 FEC ID number of contributing federal political committee.
C
 Name of Employer Occupation
Forever Resorts, Inc
 Receipt For:
 Primary General
 Other (specify)

Date of Receipt
03 / 21 / 2006
 Amount of Each Receipt this Period
5000.-
 Aggregate Year-to-Date
5000.-

SUBTOTAL of Receipts This Page (optional) **5250.-**
 TOTAL This Period (last page this line number only)

2006031515201

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

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

FOR LINE NUMBER: PAGE 4 OF 4
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Conference of National Park Concessioners PAC

A. Full Name (Last, First, Middle Initial)
David O'Hanesian

Mailing Address
One Inspiration Point

City State Zip Code
Laguna Niguel CA 92677

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Seven Resorts, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.-

Date of Receipt
03 / 23 / 2006

Amount of Each Receipt this Period
500.-

B. Full Name (Last, First, Middle Initial)
Clay James

Mailing Address
755 Paintbrush Dr.

City State Zip Code
Jackson, WY 83001

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Grand Teton Lodge, Co.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.-

Date of Receipt
03 / 27 / 2006

Amount of Each Receipt this Period
250.-

C. Full Name (Last, First, Middle Initial)
Tom Mack

Mailing Address
401 River Bend Rd

City State Zip Code
Great Falls VA 22066

FEC ID number of contributing federal political committee.
C

Name of Employer Occupation
Landmark Tours, Inc.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.-

Date of Receipt
04 / 14 / 2006

Amount of Each Receipt this Period
400.-

SUBTOTAL of Receipts This Page (optional) ▶ **1,150.-**

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

2006111513202

**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 1 OF 3

<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)
Conference of National Park Concessioners

Full Name (Last, First, Middle Initial)

A. **Taylor, Charles**
 Mailing Address: **20 N. Spruce Str.**
 City: **Asheville** State: **NC** Zip Code: **28801**
 Purpose of Disbursement: **Fundraiser**
 Candidate Name: **Cong. Charles Taylor**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

Date of Disbursement

04 / **12** / **2006**

Amount of Each Disbursement this Period

1,000.-

B. **Rahall, Nick**
 Mailing Address: **30 Ivy Str.**
 City: **Washington** State: **D.C.** Zip Code: **20515**
 Purpose of Disbursement: **Fundraiser**
 Candidate Name: **Cong. Nick Rahall**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

Date of Disbursement

05 / **24** / **2006**

Amount of Each Disbursement this Period

1,000.-

C. **Porter, John**
 Mailing Address: **Po Box 26087**
 City: **Las Vegas** State: **NV** Zip Code: **89126**
 Purpose of Disbursement: **Fundraiser**
 Candidate Name: **Cong. John Porter**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify)

Date of Disbursement

05 / **18** / **2006**

Amount of Each Disbursement this Period

1,000.-

SUBTOTAL of Disbursements This Page (optional) **3,000.-**
 TOTAL This Period (last page this line number only)

2603915M201

**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 2 OF 3

<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)
Conference of National Park Concessioners PAC

A. **Sherwood, Dan**
Full Name (Last, First, Middle Initial)

Mailing Address: **81 Warren Stn.**

City: **Tuckahoe** State: **PA** Zip Code: **18657**

Purpose of Disbursement: **Fundraiser** Category/Type: **011**

Candidate Name: **Cong. Dan Sherwood**

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

State: _____ District: _____

Date of Disbursement: **05 / 11 / 2006**

Amount of Each Disbursement this Period: **1000-**

B. **Brown, Henry**
Full Name (Last, First, Middle Initial)

Mailing Address: **PO Box 61886**

City: **North Charleston** State: **SC** Zip Code: **29419**

Purpose of Disbursement: **Fundraiser** Category/Type: **011**

Candidate Name: **Cong. Henry Brown**

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

State: _____ District: _____

Date of Disbursement: **09 / 05 / 2006**

Amount of Each Disbursement this Period: **1000-**

C. **Istook, Ernest**
Full Name (Last, First, Middle Initial)

Mailing Address: **712 N. Broadway Ave**

City: **Oklahoma City** State: **OK** Zip Code: **73102**

Purpose of Disbursement: **Fundraiser** Category/Type: **011**

Candidate Name: **Cong. Ernest Istook**

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

State: **OK** District: _____

Date of Disbursement: **03 / 29 / 2006**

Amount of Each Disbursement this Period: **500-**

SUBTOTAL of Disbursements This Page (optional)..... **2500-**

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

25039153204

**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)

Conference of National Park Concessioners PAC

Full Name (Last, First, Middle Initial)

A. Pomba, Richard

Date of Disbursement

03 / 29 / 2006

Mailing Address

PO Box 16021

City

Alexandria

State

VA

Zip Code

22302

Purpose of Disbursement

Fundraiser

011

Amount of Each Disbursement this Period

1,000-

Candidate Name

Rep. Cong. Richard Pomba

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B. Reid, Harry

Date of Disbursement

03 / 08 / 2006

Mailing Address

422 C Street NE

City

Washington

State

DC

Zip Code

20002

Purpose of Disbursement

Fundraiser

Amount of Each Disbursement this Period

1,000-

Candidate Name

Sen. Harry Reid

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Amount of Each Disbursement this Period

Candidate Name

Category/Type

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

2,000-

TOTAL This Period (last page this line number only)

2502915200

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 1 OF 2

FOR LINE NUMBER: (check only one)

9
 10

NAME OF COMMITTEE (In Full)

Conference of National Park Concessionaires Inc

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

212 Maple Ave E

Bank Service Fee

Mailing Address

Wachovia Bank

City State

Vienna VA

Zip Code

22180

Outstanding Balance Beginning This Period

[Empty box]

Amount Incurred This Period

374

Payment This Period

374

Outstanding Balance at Close of This Period

0-

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Wachovia Bank

Charge for checks

Mailing Address

212 Maple Ave E

City State

Vienna VA

Zip Code

22180

Outstanding Balance Beginning This Period

[Empty box]

Amount Incurred This Period

60-

Payment This Period

60-

Outstanding Balance at Close of This Period

0-

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

[Empty box]

Amount Incurred This Period

[Empty box]

Payment This Period

[Empty box]

Outstanding Balance at Close of This Period

[Empty box]

1) SUBTOTALS This Period This Page (optional)..... ▶

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

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)..... ▶

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

[Empty boxes for totals]

26039153206

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)

FOR LINE NUMBER: (check only one)

9 10

NAME OF COMMITTEE (in Full)
Conference of National Park Concessionaires PAC

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Wachovia Bank
Mailing Address
212 Maple Ave. E.
City State Zip Code
Vienna, VA 22180

Nature of Debt (Purpose):
Credited back
\$1.16 Service Fee

Outstanding Balance Beginning This Period
Amount Incurred This Period
Payment This Period
Outstanding Balance at Close of This Period

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mailing Address
City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period
Amount Incurred This Period
Payment This Period
Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor
Mailing Address
City State Zip Code

Nature of Debt (Purpose):

Outstanding Balance Beginning This Period
Amount Incurred This Period
Payment This Period
Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)
2) TOTALS This Period (last page this line number only)
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)

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Federal Election Commission
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