

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		21955.31
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	44708.15									
(c) Total Receipts (from Line 19)	20619.49	130269.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	65327.64	152224.80								
7. Total Disbursements (from Line 31)	11220.92	98118.08								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	54106.72	54106.72								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
Association of State Democratic Chairs

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

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	10000.00	10000.00
(i) Itemized (use Schedule A)	0.00	100.00
(ii) Unitemized	10000.00	10100.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	10000.00	10100.00
12. Transfers From Affiliated/Other Party Committees	10619.49	120169.49
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))	20619.49	130269.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	20619.49	130269.49

DETAILED SUMMARY PAGE

of Disbursements

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.....	11220.92	96618.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	11220.92	96618.08
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	1500.00
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))..	11220.92	98118.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11220.92	98118.08

DETAILED SUMMARY PAGE
of Disbursements

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)	10000.00	10100.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10000.00	10100.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11220.92	96618.08
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11220.92	96618.08

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 13
	(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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Story Clark Resor		Date of Receipt
	Mailing Address 4445 Moose Wilson Road		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Wilson	WY	83014
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Self		Occupation Conservation Consultant
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="10000.00"/>	
			Transaction ID: 11ai-000053785
			Amount of Each Receipt this Period <input type="text" value="10000.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10000.00"/>

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

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

A.

Full Name (Last, First, Middle Initial) Democratic National Committee		Date of Receipt
Mailing Address 430 South Capitol Street, SE		<input type="text" value="08"/> / <input type="text" value="01"/> / <input type="text" value="2008"/>
City	State	Zip Code
Washington	DC	20003
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID: 12-01-02038-03698
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="10619.49"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Transfer
Aggregate Year-to-Date ▼		
<input type="text" value="10619.49"/>		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="10619.49"/>
TOTAL This Period (last page this line number only)	<input type="text" value="10619.49"/>

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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Karl Sandstrom Mailing Address 4500 46th Street, NW City Washington State DC Zip Code 20016 Purpose of Disbursement Travel Stipend Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02037-03697 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 1 / 2 0 0 8 Amount of Each Disbursement this Period 456.00
B.	Full Name (Last, First, Middle Initial) Kyle DeBeer Mailing Address Apt 107 3726 Connecticut Ave NW City Washington State DC Zip Code 20008 Purpose of Disbursement Travel Stipend Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02039-03699 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 950.00
C.	Full Name (Last, First, Middle Initial) Perkins Coie LLP Mailing Address 1201 Third Avenue, 40th Floor City Seattle State WA Zip Code 98101-3099 Purpose of Disbursement Legal Fees Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02040-03700 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 5 / 2 0 0 8 Amount of Each Disbursement this Period 5430.00

SUBTOTAL of Disbursements This Page (optional)	6836.00
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 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)
Association of State Democratic Chairs

A. Full Name (Last, First, Middle Initial) Gilbert & Wolfand P.C. <hr/> Mailing Address 2201 Wisconsin Ave., NW <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement Accounting Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02042-03702 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 155.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jennie Blackton <hr/> Mailing Address 2547 North Buena Vista <hr/> City Burbank State CA Zip Code 91504 <hr/> Purpose of Disbursement General Consultant Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02043-03703 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 615.91
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Sprint PCS <hr/> Mailing Address PO Box 62071 <hr/> City Baltimore State MD Zip Code 21264-2071 <hr/> Purpose of Disbursement Telephone Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 21b-01-02044-03704 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 1 / 2 0 0 8
	Amount of Each Disbursement this Period 132.65
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

903.56

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 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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Patton Technologies, LLC	Transaction ID: 21b-01-02045-03705
	Mailing Address 2333 Alexandria Dr.	Date of Disbursement MM / DD / YYYY 08 / 13 / 2008
	City Lexington State KY Zip Code 40504	Amount of Each Disbursement this Period 900.00
	Purpose of Disbursement Compliance Service	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Geneva C. Jones	Transaction ID: 21b-01-02046-03706
	Mailing Address 6711 Weston Avenue	Date of Disbursement MM / DD / YYYY 08 / 15 / 2008
	City Capitol Heights State MD Zip Code 20743	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement Travel Stipend	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Jennie Blackton	Transaction ID: 21b-01-02047-03707
	Mailing Address 2547 North Buena Vista	Date of Disbursement MM / DD / YYYY 08 / 15 / 2008
	City Burbank State CA Zip Code 91504	Amount of Each Disbursement this Period 350.00
	Purpose of Disbursement Travel Stipend	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
	State: District:	<input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1600.00
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 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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Jon Monger	Transaction ID: 21b-01-02048-03708 Date of Disbursement 08 / 15 / 2008
	Mailing Address 3921 East Street	Amount of Each Disbursement this Period 350.00
	City Cincinatti State OH Zip Code 45227	
	Purpose of Disbursement Travel Stipend	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Anne Lansey	Transaction ID: 21b-01-02049-03709 Date of Disbursement 08 / 15 / 2008
	Mailing Address 4812 Kimberleigh Road	Amount of Each Disbursement this Period 350.00
	City Baltimore State MD Zip Code 21212-4613	
	Purpose of Disbursement Travel Stipend	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Ann Fishman	Transaction ID: 21b-01-02050-03710 Date of Disbursement 08 / 15 / 2008
	Mailing Address 10212 Windsor View	Amount of Each Disbursement this Period 600.00
	City Potomac State MD Zip Code 20854	
	Purpose of Disbursement Travel Stipend	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	1300.00
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)

PAGE 12 / 13

<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)
Association of State Democratic Chairs

A.	Full Name (Last, First, Middle Initial) Ann Fishman	Transaction ID: 21b-01-02053-03713
	Mailing Address 10212 Windsor View	Date of Disbursement MM / DD / YYYY 08 / 16 / 2008
	City Potomac State MD Zip Code 20854	Amount of Each Disbursement this Period 105.00
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Jon Monger	Transaction ID: 21b-01-02054-03714
	Mailing Address 3921 East Street	Date of Disbursement MM / DD / YYYY 08 / 17 / 2008
	City Cincinatti State OH Zip Code 45227	Amount of Each Disbursement this Period 442.18
	Purpose of Disbursement Travel Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

547.18

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

11186.74

Form/Schedule: **F3XN**

Transaction ID:

The Committee has very limited administrative expenses because it does not maintain an office or staff. What administrative costs it does incur are primarily, if not exclusively, for travel and meeting expenses. These limited administrative costs are fully disclosed on its reports.