

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

U.S. Travel Association PAC

ADDRESS (number and street) 1100 New York Avenue Suite 450W Washington DC 20005-3934

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

C C00457754

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 checked="" 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 [MM] / [DD] / [YYYY] in the State of []

(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 [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [04] / [01] / [2020] through [04] / [30] / [2020]

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Djaouga, Contina, , ,
Type or Print Name of Treasurer

Signature of Treasurer *Djaouga, Contina, , ,* [Electronically Filed] Date [05] / [06] / [2020]

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

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="2020"/> | <input type="text" value="296612.59"/> | <input type="text" value="296612.59"/> |
| (b) Cash on Hand at Beginning of Reporting Period..... | <input type="text" value="216276.05"/> | |
| (c) Total Receipts (from Line 19) | <input type="text" value="1769.99"/> | <input type="text" value="20552.95"/> |
| (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="218046.04"/> | <input type="text" value="317165.54"/> |
| 7. Total Disbursements (from Line 31)..... | <input type="text" value="25.00"/> | <input type="text" value="99144.50"/> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))..... | <input type="text" value="218021.04"/> | <input type="text" value="218021.04"/> |
| 9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D) | <input type="text" value="0.00"/> | |
| 10. Debts and Obligations Owed BY 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. 05/2016)

Page 3

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)..... | 1384.99 | 5142.12 |
| (ii) Unitemized | 385.00 | 2910.83 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶ | 1769.99 | 8052.95 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 10000.00 |
| (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) | 1769.99 | 18052.95 |
| 12. Transfers From Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 13. All Loans Received | 0.00 | 0.00 |
| 14. Loan Repayments Received..... | 0.00 | 0.00 |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)..... | 0.00 | 0.00 |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... | 0.00 | 2500.00 |
| 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)).....▶ | 1769.99 | 20552.95 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶ | 1769.99 | 20552.95 |

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 | 25.00 | 144.50 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | 25.00 | 144.50 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 0.00 | 99000.00 |
| 24. Independent Expenditures (use Schedule E) | 0.00 | 0.00 |
| 25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F)..... | 0.00 | 0.00 |
| 26. Loan Repayments Made..... | 0.00 | 0.00 |
| 27. Loans Made..... | 0.00 | 0.00 |
| 28. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | 0.00 | 0.00 |
| (b) Political Party Committees | 0.00 | 0.00 |
| (c) Other Political Committees (such as PACs)..... | 0.00 | 0.00 |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c))..... | 0.00 | 0.00 |
| 29. Other Disbursements (Including Non-Federal Donations)..... | 0.00 | 0.00 |
| 30. Federal Election Activity (52 U.S.C. § 30101(20)) | | |
| (a) Allocated Federal Election Activity (from Schedule H6) | | |
| (i) Federal Share | 0.00 | 0.00 |
| (ii) "Levin" Share..... | 0.00 | 0.00 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | 0.00 | 0.00 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | 0.00 | 0.00 |
| 31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) .. | 25.00 | 99144.50 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 25.00 | 99144.50 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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) | 1769.99 | 18052.95 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 1769.99 | 18052.95 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) | 25.00 | 144.50 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3)..... | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 25.00 | 144.50 |

**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 11 |
| | <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)
U.S. Travel Association PAC

A. Briggs, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 New York Ave NW # 450
 City Washington State DC Zip Code 20005-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President, Industry Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1260.00

Date of Receipt 04 / 30 / 2020
Transaction ID : AB108CA5B57E74BF4848
 Amount of Each Receipt this Period 420.00
 Memo Item
 Payroll Deduction: \$210.00/Bi-Weekly

B. Glenn, Treon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1613 Isherwood St NE Apt 2
 City Washington State DC Zip Code 20002-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Senior Director, Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 04 / 30 / 2020
Transaction ID : A3309C4407B8645F89EA
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll Deduction: \$45.00/Bi-Weekly

C. Hansen, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 11th St NW Apt 603
 City Washington State DC Zip Code 20001-6425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President of Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2020
Transaction ID : AAE6E58A9DD4046C6A6D
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$75.00/Bi-Weekly

| | |
|---|--------|
| SUBTOTAL of Receipts This Page (optional)..... | 660.00 |
| TOTAL This Period (last page this line number only)..... | |

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

| | | |
|---|---|--------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 OF 11 |
| | <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. Marchand, Djenane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3548 N Dickerson St
 City Arlington State VA Zip Code 22207-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) SVP, Membership & Industry Relations;
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1466.64

Date of Receipt 04 / 30 / 2020
Transaction ID : A7E258FD70E1A41DAA00
 Amount of Each Receipt this Period 366.64
 Memo Item
 Payroll Deduction: \$183.33/Bi-Weekly

B. Smith, Malcolm, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 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 (for Individual) U.S. Travel Association Occupation (for Individual) Senior Vice President, Business Develo
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1458.31

Date of Receipt 04 / 15 / 2020
Transaction ID : A788907CB735446D3BD8
 Amount of Each Receipt this Period 208.33
 Memo Item
 Payroll Deduction: \$208.33/Bi-Weekly

C. Vance, Adam, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1645 Lozano Dr
 City Vienna State VA Zip Code 22182-1947
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Executive Vice President, Operations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt 04 / 30 / 2020
Transaction ID : A134646804FD64B02A65
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$75.00/Bi-Weekly

| | |
|---|---------|
| SUBTOTAL of Receipts This Page (optional)..... | 724.99 |
| TOTAL This Period (last page this line number only)..... | 1384.99 |

**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"/> 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. FRIENDS OF JIM CLYBURN

Mailing Address 499 South Capitol Street SW
Suite 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement
Contribution to Committee

Category/
Type

Candidate Name
Clyburn, James, E., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: SC District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B9B2CB9791
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF JIM CLYBURN

Mailing Address 499 South Capitol Street SW
Suite 422

City Washington State DC Zip Code 20003-4028

Purpose of Disbursement
VOID - Contribution to Committee

Category/
Type

Candidate Name
Clyburn, James, E., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: SC District: 06

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : BDAA8D6418
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C. DONNA SHALALA FOR CONGRESS

Mailing Address PO Box 15845

City Washington State DC Zip Code 20003-0845

Purpose of Disbursement
VOID - Contribution to Committee

Category/
Type

Candidate Name
Shalala, Donna, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: FL District: 27

Date of Disbursement

/ /

FEC Identification Number

Transaction ID : B866418DEE
Amount of Each Disbursement this Period

Memo Item

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"/> 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. DONNA SHALALA FOR CONGRESS

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | / | 14 | / | 2020 |

Mailing Address PO Box 15845

FEC Identification Number

C C00672311

City Washington State DC Zip Code 20003-0845

Transaction ID : B05160B8D0'
Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution to Committee

011
Category/
Type

1000.00

Candidate Name
Shalala, Donna, , ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: FL District: 27

Full Name (Last, First, Middle Initial)
B. FRIENDS OF MARK WARNER

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | / | 14 | / | 2020 |

Mailing Address 750 1st St NE, Suite 1070

FEC Identification Number

C C00438713

City Washington State DC Zip Code 20002-8008

Transaction ID : BF210F17CCI
Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution to Committee

011
Category/
Type

500.00

Candidate Name
Warner, Mark, R., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: VA District:

Full Name (Last, First, Middle Initial)
C. FRIENDS OF MARK WARNER

Date of Disbursement

| | | | | |
|-------|---|-------|---|-----------|
| M M M | / | D D D | / | Y Y Y Y Y |
| 04 | / | 14 | / | 2020 |

Mailing Address 750 1st St NE, Suite 1070

FEC Identification Number

C C00438713

City Washington State DC Zip Code 20002-8008

Transaction ID : B52B16A141
Amount of Each Disbursement this Period

Purpose of Disbursement
VOID - Contribution to Committee

011
Category/
Type

- 2000.00

Candidate Name
Warner, Mark, R., ,

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

Memo Item

State: VA District:

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

- 500.00

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"/> 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. FRIENDS OF MARK WARNER | | Date of Disbursement MM / DD / YYYY 04 / 14 / 2020 |
| Mailing Address 750 1st St NE, Suite 1070 | | FEC Identification Number C 000438713 Transaction ID : B123562AA8! Amount of Each Disbursement this Period - 500.00 |
| City Washington | State DC | Zip Code 20002-8008 |
| Purpose of Disbursement VOID - Contribution to Committee | | 011 Category/ Type |
| Candidate Name Warner, Mark, R., , | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: VA | District: | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. FRIENDS OF MARK WARNER | | Date of Disbursement MM / DD / YYYY 04 / 14 / 2020 |
| Mailing Address 750 1st St NE, Suite 1070 | | FEC Identification Number C 000438713 Transaction ID : B9AFE2888B! Amount of Each Disbursement this Period 2000.00 |
| City Washington | State DC | Zip Code 20002-8008 |
| Purpose of Disbursement Contribution to Committee | | 011 Category/ Type |
| Candidate Name Warner, Mark, R., , | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: VA | District: | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. PALLONE FOR CONGRESS | | Date of Disbursement MM / DD / YYYY 04 / 16 / 2020 |
| Mailing Address 495 Broadway | | FEC Identification Number C 000226928 Transaction ID : B5FBB2C5B! Amount of Each Disbursement this Period - 1000.00 |
| City Long Branch | State NJ | Zip Code 07740-5901 |
| Purpose of Disbursement VOID - Contribution to Committee | | 011 Category/ Type |
| Candidate Name Pallone, Frank, J., , Jr. | | Memo Item <input type="checkbox"/> |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| State: NJ | District: 06 | |

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

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

| |
|--------|
| 500.00 |
| |

**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 checked="" type="checkbox"/> 23 | <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

A. PALLONE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address 495 Broadway

City Long Branch State NJ Zip Code 07740-5901

Purpose of Disbursement Contribution to Committee

Candidate Name Pallone, Frank, J., , Jr.

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NJ District: 06

Date of Disbursement 04 / 16 / 2020

FEC Identification Number C00226928

Transaction ID : B6565072622

Amount of Each Disbursement this Period 1000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional).....▶ | 1000.00 |
| TOTAL This Period (last page this line number only).....▶ | 0.00 |