

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**
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

ADDRESS (number and street) **7628 HUNTMASER LN**
▼
 Check if different than previously reported. (ACC) **McLean VA 22102**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C 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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2014 through / / 2014

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

Signature of Treasurer Crandall, Derrick, , , [Electronically Filed] Date / / 2022

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

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

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="46806.52"/>	<input type="text" value="46806.52"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="46806.52"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="10.02"/>	<input type="text" value="10.02"/>
(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="46816.54"/>	<input type="text" value="46816.54"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1502.72"/>	<input type="text" value="1502.72"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="45313.82"/>	<input type="text" value="45313.82"/>
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

Write or Type Committee Name

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

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).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(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)	0.00	0.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	10.02	10.02
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)).....▶	10.02	10.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	10.02	10.02

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	2.72	2.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2.72	2.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1500.00	1500.00
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)) ..	1502.72	1502.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1502.72	1502.72

DETAILED SUMMARY PAGE
of Disbursements

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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)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2.72	2.72
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2.72	2.72

**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 16
<input 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 checked="" type="checkbox"/> 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **9.17**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	28	/	2014

Transaction ID : AE5193D72914D44FB98D

Amount of Each Receipt this Period

0.82

Memo Item
Bank Interest

B. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **2.47**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	31	/	2014

Transaction ID : AFA389EE8D47D4D3B903

Amount of Each Receipt this Period

0.85

Memo Item
Bank Interest

C. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **8.35**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	31	/	2014

Transaction ID : A6304E51965824F53BB6

Amount of Each Receipt this Period

0.86

Memo Item
Bank Interest

SUBTOTAL of Receipts This Page (optional).....	2.53
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 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10.02

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : AFA6C44C237A84EB6B08

Amount of Each Receipt this Period
0.85

Memo Item
Bank Interest

B. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2.63

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	07	/	2014

Transaction ID : AC3A6697B5FB945449D9

Amount of Each Receipt this Period
0.16

Memo Item
Bank Interest

C. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
3.29

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	30	/	2014

Transaction ID : A9D81AD6ACCCDC4A42B37

Amount of Each Receipt this Period
0.66

Memo Item
Bank Interest

SUBTOTAL of Receipts This Page (optional).....	1.67
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4.97**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		30		2014

Transaction ID : A96C2149AF5E146B893E

Amount of Each Receipt this Period

0.83

Memo Item
Bank Interest

B. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **4.14**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		30		2014

Transaction ID : A007B225501644A16882

Amount of Each Receipt this Period

0.85

Memo Item
Bank Interest

C. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **6.67**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		29		2014

Transaction ID : AECFE994CD4BB4C57A39

Amount of Each Receipt this Period

0.85

Memo Item
Bank Interest

SUBTOTAL of Receipts This Page (optional).....▶	2.53
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1.62**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	28	/	2014

Transaction ID : A5130B331591746A6AF1

Amount of Each Receipt this Period

0.77

Memo Item
Bank Interest

B. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **7.49**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2014

Transaction ID : A7FC89B0A93944D15A3E

Amount of Each Receipt this Period

0.82

Memo Item
Bank Interest

C. Wells Fargo

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼ **0.85**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	31	/	2014

Transaction ID : A962E563DFB814F4E9C2

Amount of Each Receipt this Period

0.85

Memo Item
Bank Interest

SUBTOTAL of Receipts This Page (optional).....	2.44
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 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean	State VA	Zip Code 22102-3844
----------------	-------------	------------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5.82

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		31		2014

Transaction ID : A24654B6A667E447FAA7

Amount of Each Receipt this Period
0.85

Memo Item
Bank Interest

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	0.85
TOTAL This Period (last page this line number only).....▶	10.02

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2014

FEC Identification Number

C
Transaction ID : BE60064BE2
Amount of Each Disbursement this Period
0.23

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2014

FEC Identification Number

C
Transaction ID : B3254D81D5
Amount of Each Disbursement this Period
0.21

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2014

FEC Identification Number

C
Transaction ID : B11EE3A48E
Amount of Each Disbursement this Period
0.23

Memo Item

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

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

0.67

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City
McLean

State
VA

Zip Code
22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	4

FEC Identification Number

C [REDACTED]

Transaction ID : B1E0F3870BI
Amount of Each Disbursement this Period

[REDACTED] 0.04

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City
McLean

State
VA

Zip Code
22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		3	0		2	0	1	4

FEC Identification Number

C [REDACTED]

Transaction ID : B01D45CF54i
Amount of Each Disbursement this Period

[REDACTED] 0.18

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City
McLean

State
VA

Zip Code
22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		3	0		2	0	1	4

FEC Identification Number

C [REDACTED]

Transaction ID : B33655F2CF
Amount of Each Disbursement this Period

[REDACTED] 0.23

Memo Item

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

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

[REDACTED] 0.45

[REDACTED]

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

A. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 06 / 30 / 2014

FEC Identification Number: C

Transaction ID : B7C8974380E

Amount of Each Disbursement this Period: 0.23

Memo Item

B. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 07 / 31 / 2014

FEC Identification Number: C

Transaction ID : BCAF27081C

Amount of Each Disbursement this Period: 0.23

Memo Item

C. Wells Fargo

Full Name (Last, First, Middle Initial)

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 08 / 29 / 2014

FEC Identification Number: C

Transaction ID : B4001C00E5

Amount of Each Disbursement this Period: 0.23

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 0.69

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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

Full Name (Last, First, Middle Initial)

A. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 30 / 2014

FEC Identification Number

C []

Transaction ID : **BF4354602F6**

Amount of Each Disbursement this Period

[] 0.22

Memo Item

Full Name (Last, First, Middle Initial)

B. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

FEC Identification Number

C []

Transaction ID : **BBEA59C77B**

Amount of Each Disbursement this Period

[] 0.24

Memo Item

Full Name (Last, First, Middle Initial)

C. Wells Fargo

Mailing Address 1753 Pinnacle Dr

City McLean State VA Zip Code 22102-3844

Purpose of Disbursement
Tax Withholding

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 28 / 2014

FEC Identification Number

C []

Transaction ID : **BF85FC50A4**

Amount of Each Disbursement this Period

[] 0.22

Memo Item

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

[] 0.68

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)

NATIONAL PARK HOSPITALITY ASSOCIATION POLITICAL ACTION COMMITTEE(CONPAC)

Full Name (Last, First, Middle Initial)

A. Sam Farr for Congress

Mailing Address 555 CAPITOL MALL, SUITE 1425

City
Sacramento

State
CA

Zip Code
95814-4602

Purpose of Disbursement
Contribution to Committee

Candidate Name

Sam Farr for Congress

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	26	/	2014

FEC Identification Number

C C00279372

Transaction ID : BF4E7D155B

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. A WHOLE LOT OF PEOPLE FOR GRIJALVA CONGRESSIONAL COMMITTEE

Mailing Address PO BOX 1242

City
Tucson

State
AZ

Zip Code
85702-1242

Purpose of Disbursement
Contribution to Committee

Candidate Name

A WHOLE LOT OF PEOPLE FOR GRIJALVA CONGRESSIONAL COMMITTEE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07	/	02	/	2014

FEC Identification Number

C C00374058

Transaction ID : BC13B34425C

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C.

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

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

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

1500.00

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

1500.00