

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.

U.S. Travel Association PAC

ADDRESS (number and street)

 Check if different than previously reported. (ACC)

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

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 checked="" type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) | |

Election on / / 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 / / in the State of

5. Covering Period / / through / /

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 David Mimm

Signature of Treasurer David Mimm [Electronically Filed] Date / /

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2012"/>		108858.18
(b) Cash on Hand at Beginning of Reporting Period.....	85940.06	
(c) Total Receipts (from Line 19)	5520.00	193455.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	91460.06	302313.18
7. Total Disbursements (from Line 31).....	12050.32	222903.44
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	79409.74	79409.74
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

U.S. Travel Association PAC

Report Covering the Period: From: / / To: / /

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5439.00	160576.00
(ii) Unitemized	81.00	2379.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	5520.00	162955.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	25000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	5520.00	187955.00
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	5500.00
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))..... ▶	5520.00	193455.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	5520.00	193455.00

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	6050.32	9645.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	6050.32	9645.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	213000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	200.00
(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	200.00
29. Other Disbursements	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	57.50
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	57.50
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	12050.32	222903.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12050.32	222903.44

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)	5520.00	187955.00
34. Total Contribution Refunds (from Line 28(d))	0.00	200.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5520.00	187755.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	6050.32	9645.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	6050.32	9645.94

**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 10
<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. Jeremy Jacobs, Jr.
Full Name (Last, First, Middle Initial)

Mailing Address 1600 North Davis Road

City East Aurora State NY Zip Code 14052-9440

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

Name of Employer Delaware North Companies, Inc Occupation Principal

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 02 / 2012
Transaction ID : AA1197819DC0A4CDEB70

Amount of Each Receipt this Period
5000.00

Contribution

B. Dennis Castleman
Full Name (Last, First, Middle Initial)

Mailing Address 8379 Sweet Cherry Ln

City Laurel State MD Zip Code 20723

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

Name of Employer U S Travel Association Occupation Vp Industry Relations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1140.00

Date of Receipt
10 / 15 / 2012
Transaction ID : A926C47F5BB6B4CC49D7

Amount of Each Receipt this Period
60.00

Contribution Payroll Deduction: \$60.00/Bi-Monthly

C. Erik Hansen
Full Name (Last, First, Middle Initial)

Mailing Address 614 Elliott St. NE Apt 1B

City Washington State DC Zip Code 20002-5456

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

Name of Employer U.S. Travel Association Occupation Director, Domestic Policy

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 15 / 2012
Transaction ID : A53471744C80648AAB9A

Amount of Each Receipt this Period
65.00

Contribution Payroll Deduction: \$65.00/Bi-Monthly

SUBTOTAL of Receipts This Page (optional)..... ▶ 5125.00

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 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Gary Oster
Full Name (Last, First, Middle Initial)

Mailing Address 1922 Eamons Way

City Annapolis State MD Zip Code 21401-3196

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

Name of Employer U S Travel Association Occupation Sr. Vp Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2166.00

Date of Receipt
10 / 15 / 2012
Transaction ID : **A9BADF4A421A0425787F**

Amount of Each Receipt this Period
114.00

Contribution Payroll Deduction: \$114.00/Bi-Monthly

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

Mailing Address 5205 14th St NW

City Washington State DC Zip Code 20011-6929

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

Name of Employer U S Travel Association Occupation Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1140.00

Date of Receipt
10 / 15 / 2012
Transaction ID : **AAE20EDF49A044DC59CB**

Amount of Each Receipt this Period
200.00

Contribution Payroll Deduction: \$200.00/Bi-Monthly

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	314.00
TOTAL This Period (last page this line number only).....▶	5439.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. PNC Bank

Mailing Address 1100 H Street NW

City Washington State DC Zip Code 20005

Purpose of Disbursement
Bank Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 04 / 2012

Transaction ID : B498DB84128CB448E995

Amount of Each Disbursement this Period

104.38

Full Name (Last, First, Middle Initial)

B. U.S. Travel Association

Mailing Address 1100 New York Avenue NW
Suite 450

City Washington State DC Zip Code 20005

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

003

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 05 / 2012

Transaction ID : B08A40483F7324B09AA3

Amount of Each Disbursement this Period

5793.34

Full Name (Last, First, Middle Initial)

C. American Express

Mailing Address P.O. Box 53852

City Phoenix State AZ Zip Code 85072-3852

Purpose of Disbursement
Credit Card Fees

001

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2012

Transaction ID : B4FAE6D78DF274CB0BF8

Amount of Each Disbursement this Period

152.60

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

6050.32

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

6050.32

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. CANDICE MILLER FOR CONGRESS

Mailing Address PO BOX 182152

City State Zip Code
SHELBY TOWNSHIP MI 48318

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. Candice S Miller

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: MI District: 10

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : BDEF7A2CAB1E34D0B8FE

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Friends Of Schumer

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code
New York NY 10022-5523

Purpose of Disbursement
Lost Check- Contribution from 9-17-12

011

Candidate Name

Sen. Charles E. Schumer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : BC2C9F496D29E49A78C5

Amount of Each Disbursement this Period

-1000.00

Full Name (Last, First, Middle Initial)

C. Friends Of Schumer

Mailing Address 509 MADISON AVE SUITE 1902

City State Zip Code
New York NY 10022-5523

Purpose of Disbursement
Political Contribution- Reissue of Lost Check from 9-17-12

011

Candidate Name

Sen. Charles E. Schumer

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2016
 Primary General
 Other (specify) ▼

State: NY District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			09			2012			

Transaction ID : B9CBD9864272A4CCDB92

Amount of Each Disbursement this Period

1000.00

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

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

2000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. MCCAUL FOR CONGRESS, INC

Mailing Address 815-A BRAZOS STREET
PMB 230

City AUSTIN State TX Zip Code 78701

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. Michael Mccaul

Category/
Type

Office Sought: House
 Senate
 President
State: TX District: 10

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2012

Transaction ID : BAA50050221E84C8A83E

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Price For Congress

Mailing Address P.O. Box 1986

City Raleigh State NC Zip Code 27602

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. David E. Price

Category/
Type

Office Sought: House
 Senate
 President
State: NC District: 04

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2012

Transaction ID : BE23859CE7513442A9CB

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCHIFF FOR CONGRESS

Mailing Address 777 S. FIGUEROA ST., STE. 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement
Political Contribution

011

Candidate Name

Rep. Adam Schiff

Category/
Type

Office Sought: House
 Senate
 President
State: CA District: 29

Disbursement For: 2012
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2012

Transaction ID : B0422F2333D5F4D73BC8

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

6000.00