

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
International Association of Holiday Inns

ADDRESS (number and street) Three Ravinia Drive Suite 100
 Check if different than previously reported. (ACC)
Atlanta GA 30346

2. **FEC IDENTIFICATION NUMBER** C00084822
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 Quarterly 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 (12G)
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 07 01 2005 through 12 31 2005

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 Ms Eva Ferguson

Signature of Treasurer Electronically Filed by Ms Eva Ferguson Date 02 27 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
International Association of Holiday Inns

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

	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>5</td></tr></table>	Y	Y	Y	Y	2	0	0	5		32862.13
Y	Y	Y	Y							
2	0	0	5							
(b) Cash on Hand at Beginning of Reporting Period	30887.13									
(c) Total Receipts (from Line 19)	36021.61	51271.61								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	66908.74	84133.74								
7. Total Disbursements (from Line 31)	8330.00	25555.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	58578.74	58578.74								
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**

Write or Type Committee Name
International Association of Holiday Inns

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	5

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	5

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	35646.61	49146.61
(i) Itemized (use Schedule A)	375.00	2125.00
(ii) Unitemized	36021.61	51271.61
(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)	36021.61	51271.61
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.)	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))	36021.61	51271.61
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	36021.61	51271.61

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	7500.00	24000.00
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.....	830.00	1555.00
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))..	8330.00	25555.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	8330.00	25555.00

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)	36021.61	51271.61
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36021.61	51271.61
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 30
	<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	

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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Robert Alter Mailing Address PO Box 4240 City SanClemente State CA Zip Code 92674 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 07 / 15 / 2005 Transaction ID: SA11A1.4283 Amount of Each Receipt this Period 1000.00
Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3250.00	

B. Full Name (Last, First, Middle Initial) M Amaral Mailing Address 3445 Peachtree Road NE Suite 700 City Atlanta State GA Zip Code 30326 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005 Transaction ID: SA11A1.4284 Amount of Each Receipt this Period 350.00
Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

C. Full Name (Last, First, Middle Initial) Carl R Baladus Mailing Address PO Box 1068 City La Plata State MD Zip Code 20646 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005 Transaction ID: SA11A1.4285 Amount of Each Receipt this Period 150.00
Name of Employer Unknown Occupation Unknown Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	1500.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. Saul Bernstein		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005	
Mailing Address 10008 Bent Cross Drive		Transaction ID: SA11A1.4286	
City State Zip Code Potomac MD 20852	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. Ted Blue		Date of Receipt M M / D D / Y Y Y Y 08 / 15 / 2005	
Mailing Address PO Box 334		Transaction ID: SA11A1.4287	
City State Zip Code Las Cruces NM 88004	Amount of Each Receipt this Period 325.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) C. Brian and Constance Brandstetter		Date of Receipt M M / D D / Y Y Y Y 08 / 12 / 2005	
Mailing Address 8529 Trailside Drive #101		Transaction ID: SA11A1.4343	
City State Zip Code De Forest WI 53532	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional) ▶	1075.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. John Bukovac		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2005	
Mailing Address 44 Morton Avenue		Transaction ID: SA11A1.4291	
City State Zip Code Dundas ZZ 11111	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. C Bulak		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005	
Mailing Address 7350 Crompton Court		Transaction ID: SA11A1.4290	
City State Zip Code Atlanta GA 30350	Amount of Each Receipt this Period 225.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) C. Mike and Hope Carabonara		Date of Receipt M M / D D / Y Y Y Y 08 / 21 / 2005	
Mailing Address 1520 Dodds St.		Transaction ID: SA11A1.4292	
City State Zip Code Mt Vernon IL 62864	Amount of Each Receipt this Period 350.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

SUBTOTAL of Receipts This Page (optional) ▶	925.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Kenneth Castrop

Mailing Address 5775 Perimeter Drive

City State Zip Code
Dublin OH 43017

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

Name of Employer Unknown Occupation Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 18 / 2005

Transaction ID: SA11A1.4293

Amount of Each Receipt this Period
175.00

B. Full Name (Last, First, Middle Initial)
Ronald P Cook

Mailing Address 1300 Gardiner Lane Suite 1

City State Zip Code
Louisville KY 40213

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

Name of Employer Unknown Occupation Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
08 / 21 / 2005

Transaction ID: SA11A1.4295

Amount of Each Receipt this Period
300.00

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

Mailing Address 1154 Clanton Road

City State Zip Code
Dyersburg TN 38024

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

Name of Employer Unknown Occupation Unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 21 / 2005

Transaction ID: SA11A1.4296

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	825.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
James E Dora, Sr

Mailing Address 2501 S High Scholl road

City Indianapolis State IN Zip Code 46241

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1650.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	2	0	/	2	0	0	5

Transaction ID: SA11A1.4297

Amount of Each Receipt this Period
900.00

B. Full Name (Last, First, Middle Initial)
Anthony and Sandra Etnyre

Mailing Address 2710 Chestnut Court

City Columbus State IN Zip Code 47201

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

Name of Employer Unknwn Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	5

Transaction ID: SA11A1.4298

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Sam J Friedman

Mailing Address 321 Starlight Point Road

City Natchitoches State LA Zip Code 71457

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	0	5

Transaction ID: SA11A1.4299

Amount of Each Receipt this Period
900.00

SUBTOTAL of Receipts This Page (optional)	▶	2150.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. Keith Gamble		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005
Mailing Address 8520 Business Park Drive		Transaction ID: SA11A1.4300
City State Zip Code Shrevepark LA 71105	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) B. Jerald Good		Date of Receipt M M / D D / Y Y Y Y 09 / 20 / 2005
Mailing Address 660 Marthland Drive Suite A		Transaction ID: SA11A1.4301
City State Zip Code Valparaisa IN 46385	Amount of Each Receipt this Period 1975.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1975.00	

Full Name (Last, First, Middle Initial) C. M Govrgey		Date of Receipt M M / D D / Y Y Y Y 09 / 18 / 2005
Mailing Address 48 Rochester Row		Transaction ID: SA11A1.4302
City State Zip Code London ZZ 11111	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	2625.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. Dan Houseworth		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2005
Mailing Address PO Box 1408		Transaction ID: SA11A1.4303
City State Zip Code Blytheville AZ 72316	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) B. Paul Iskan		Date of Receipt M M / D D / Y Y Y Y 08 / 28 / 2005
Mailing Address PO Vox 174		Transaction ID: SA11A1.4307
City State Zip Code Montchanin DE 19170	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

Full Name (Last, First, Middle Initial) C. George Justus		Date of Receipt M M / D D / Y Y Y Y 08 / 08 / 2005
Mailing Address 31 Hunters Pointe		Transaction ID: SA11A1.4308
City State Zip Code Pittsford NY 14534	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

SUBTOTAL of Receipts This Page (optional) ▶	1000.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Erik J Kanford

Mailing Address 4243 Hunt Road

City State Zip Code
Cincinnati OH 45242

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4309

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
Dave Kimsey

Mailing Address 1999 Wabash Suite 206

City State Zip Code
Springfield IL 62704

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 1 1 / 2 0 0 5

Transaction ID: SA11A1.4310

Amount of Each Receipt this Period
350.00

C. Full Name (Last, First, Middle Initial)
Leroy G Lail

Mailing Address 2258 Highway 70 SE

City State Zip Code
Hickory NC 28602

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1225.00

Date of Receipt
M M / D D / Y Y Y Y
0 8 / 2 4 / 2 0 0 5

Transaction ID: SA11A1.4311

Amount of Each Receipt this Period
775.00

SUBTOTAL of Receipts This Page (optional)	▶	1425.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. Renee Logan		Date of Receipt M M / D D / Y Y Y Y 08 / 24 / 2005	
Mailing Address 29 South La Salle Street		Transaction ID: SA11A1.4312	
City State Zip Code Chicago IL 60603		Amount of Each Receipt this Period 600.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown Occupation Unknown			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) B. Serge Lussi,		Date of Receipt M M / D D / Y Y Y Y 07 / 20 / 2005	
Mailing Address 1 Olympic Drive		Transaction ID: SA11A1.4313	
City State Zip Code Lake Placid NY 12946		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown Occupation Unknown			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) C. Javier Maldonado		Date of Receipt M M / D D / Y Y Y Y 07 / 29 / 2005	
Mailing Address Olimpia 1708 Col. Nueva Lindavista		Transaction ID: SA11A1.4314	
City State Zip Code Guadalupe NC 67110		Amount of Each Receipt this Period 175.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown Occupation Unknown			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 325.00	

SUBTOTAL of Receipts This Page (optional) ▶	1125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. John S McGraw		Date of Receipt M M / D D / Y Y Y Y 09 / 19 / 2005	
Mailing Address 210 Ludlow Street		Transaction ID: SA11A1.4315	
City Warren	State PA	Zip Code 16365	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) B. Elliott Miles		Date of Receipt M M / D D / Y Y Y Y 09 / 17 / 2005	
Mailing Address 1724 Marie Drive		Transaction ID: SA11A1.4316	
City Hopkinsville	State KY	Zip Code 42240	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00		

Full Name (Last, First, Middle Initial) C. Dean Morgan		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005	
Mailing Address 660 Marthland Drive		Transaction ID: SA11A1.4317	
City Balparaiso	State IN	Zip Code 46385	Amount of Each Receipt this Period 175.00
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown	Occupation Unknown		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

SUBTOTAL of Receipts This Page (optional) ▶	975.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Brian Ostrander

Mailing Address 119 12th Ave SW

City State Zip Code
Calgary ZZ

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

Name of Employer Unknown
Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
MM / DD / YYYY
08 / 18 / 2005

Transaction ID: SA11A1.4318

Amount of Each Receipt this Period
350.00

B. Full Name (Last, First, Middle Initial)
Doug Owings

Mailing Address 5100 Popular Avenue Suite 300

City State Zip Code
Memphis TN 38137

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

Name of Employer Unknown
Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2005

Transaction ID: SA11A1.4304

Amount of Each Receipt this Period
300.00

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

Mailing Address 4335 Chartilly Shopping Center

City State Zip Code
Chantilly VA 20151

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

Name of Employer Unknown
Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
MM / DD / YYYY
07 / 15 / 2005

Transaction ID: SA11A1.4305

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	950.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Robert J Redaelli		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005	
Mailing Address 107 Clubhouse Drive		Transaction ID: SA11A1.4319	
City State Zip Code Elk City OK 73644		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown		Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) Clint Reed		Date of Receipt M M / D D / Y Y Y Y 08 / 18 / 2005	
Mailing Address 2475 Maggio Circle		Transaction ID: SA11A1.4320	
City State Zip Code Lozi CA 95240		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown		Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

C. Full Name (Last, First, Middle Initial) Phillip Richardson		Date of Receipt M M / D D / Y Y Y Y 09 / 09 / 2005	
Mailing Address 142 Alwoodley		Transaction ID: SA11A1.4321	
City State Zip Code Williamsburg VA 23188-7466		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Unknown		Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	650.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Fred and Patricia Russell

Mailing Address 3600 Pacific Avenue

City State Zip Code
Virginia Beach VA 23451

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	5

Transaction ID: SA11A1.4322

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Gary Schahet

Mailing Address 9333 N Meridian St

City State Zip Code
Indianapolis IN 46260

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

Name of Employer Unkn own Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	5	/	2	0	0	5

Transaction ID: SA11A1.4323

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
Roland and Robin Schick

Mailing Address 4610 N. Springs Ct

City State Zip Code
Dunwoody GA 30338

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	1	1	/	2	0	0	5

Transaction ID: SA11A1.4324

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)	▶	750.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
David and Andrea Shamaian

Mailing Address 319 Spear Street

City Natick State ME Zip Code 01700-1506

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	4		2	0	0	5

Transaction ID: SA11A1.4325

Amount of Each Receipt this Period
625.00

B. Full Name (Last, First, Middle Initial)
John A Simpson

Mailing Address PO Box 1099

City Solomons State MD Zip Code 20688

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	2		2	0	0	5

Transaction ID: SA11A1.4326

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
S.K. and Sharon Simpson

Mailing Address 4960 Rose Creek Drive

City Cumming State GA Zip Code 30040

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	1		2	0	0	5

Transaction ID: SA11A1.4327

Amount of Each Receipt this Period
225.00

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
R Soumako

Mailing Address 420 Sherbrooke West

City Montreal State ZZ Zip Code 11111

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	2	8	/	2	0	0	5

Transaction ID: SA11A1.4330

Amount of Each Receipt this Period
225.00

B. Full Name (Last, First, Middle Initial)
Glen Squires

Mailing Address 117 Kearney Lake Road

City Halifax State ZZ Zip Code 11111

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	1	/	2	0	0	5

Transaction ID: SA11A1.4328

Amount of Each Receipt this Period
350.00

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

Mailing Address PO Box 4740

City Horseshoe Bay State TX Zip Code 78657

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

Name of Employer Unknown Occupation Unknown

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7	/	1	4	/	2	0	0	5

Transaction ID: SA11A1.4329

Amount of Each Receipt this Period
350.00

SUBTOTAL of Receipts This Page (optional)	▶	925.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Frank Sun		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2005
Mailing Address 77 W. Buckley Road		Transaction ID: SA11A1.4331
City State Zip Code Libertyville IL 60048	Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B. Full Name (Last, First, Middle Initial) Rick Takach, Jr.		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2005
Mailing Address 701 SE Columbia Shores Blvd		Transaction ID: SA11A1.4332
City State Zip Code Vancouver WA 98661	Amount of Each Receipt this Period 175.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

C. Full Name (Last, First, Middle Initial) Cheryl Treadwl		Date of Receipt M M / D D / Y Y Y Y 08 / 01 / 2005
Mailing Address 472 Aaron Drive		Transaction ID: SA11A1.4333
City State Zip Code Forsyth GA 38138	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Unknown	Occupation Unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

SUBTOTAL of Receipts This Page (optional) ▶	675.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 30
	<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. YE Unitemized		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 5
Mailing Address Unknown		Transaction ID: SA11A1.4377
City State Zip Code Unknown GA 30346		Amount of Each Receipt this Period 15574.97
FEC ID number of contributing federal political committee. C		
Name of Employer unknown	Occupation unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 15574.97	

Full Name (Last, First, Middle Initial) B. Kongmay Wang		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 0 / 2 0 0 5
Mailing Address 7101 Concourse Pkwy		Transaction ID: SA11A1.4334
City State Zip Code Douglasville GA 30134		Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C		
Name of Employer unknown	Occupation unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. Bud Waters		Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 3 / 2 0 0 5
Mailing Address 1805 Hotel Plaza Boulevard		Transaction ID: SA11A1.4335
City State Zip Code Lake Buena Vista FL 32830		Amount of Each Receipt this Period 225.00
FEC ID number of contributing federal political committee. C		
Name of Employer unknown	Occupation unknown	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	15949.97
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 30
	<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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Norman J Weitzel		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 1 1 / 2 0 0 5
Mailing Address PO Box 155		Transaction ID: SA11A1.4336
City Milton State WI Zip Code 53563	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer unknown Occupation unknown	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) David Wespisar		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 1 2 / 2 0 0 5
Mailing Address 22East High Street		Transaction ID: SA11A1.4339
City Oxford State OH Zip Code 45056	Amount of Each Receipt this Period 175.00	
FEC ID number of contributing federal political committee. C		
Name of Employer unknown Occupation unknown	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) George M Whitson		Date of Receipt M M / D D / Y Y Y Y Y 0 8 / 2 7 / 2 0 0 5
Mailing Address 1706 Imperial Lane		Transaction ID: SA11A1.4340
City Findlay State OH Zip Code 45840	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer unknown Occupation unknown	Aggregate Year-to-Date ▼ 300.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	475.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 24 / 30
	(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

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Lynda Yachimec

Mailing Address 10017-179 Street

City State Zip Code
Edmonson ZZ 11111

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

Name of Employer Occupation
unknown unknown

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
321.64

Date of Receipt
M M / D D / Y Y Y Y
07 / 14 / 2005

Transaction ID: SA11A1.4341

Amount of Each Receipt this Period
321.64

B. Full Name (Last, First, Middle Initial)
Mark Zipperer

Mailing Address 2129 S Germantown Road

City State Zip Code
Germantown TN 38138

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
M M / D D / Y Y Y Y
07 / 13 / 2005

Transaction ID: SA11A1.4342

Amount of Each Receipt this Period
325.00

SUBTOTAL of Receipts This Page (optional)	▶	646.64
TOTAL This Period (last page this line number only)	▶	35646.61

**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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. CHARLIE MELANCON CAMPAIGN COMMITTEE INC

Mailing Address 511 CONGRESS ST
PO BOX 549

City NAPOLEONVILLE State LA Zip Code 70390

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: LA District: 03

Transaction ID: SB23.4344

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Dan Boren for Congress

Mailing Address PO Box 149

City Okemah State OK Zip Code 74859

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: OK District: 06

Transaction ID: SB23.4345

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CLIFF STEARNS

Mailing Address PO BOX 308

City SILVER SPRINGS State FL Zip Code 34489

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: FL District: 06

Transaction ID: SB23.4346

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1500.00

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 26 / 30

<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. FRIENDS OF CONRAD BURNS - 2006		Transaction ID: SB23.4347 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2005
Mailing Address PO BOX 1596		Amount of Each Disbursement this Period 1000.00
City HELENA State MT Zip Code 59624	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. FRIENDS OF SAM JOHNSON		Transaction ID: SB23.4350 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2005
Mailing Address 1611 Avenue K		Amount of Each Disbursement this Period 500.00
City Plano State TX Zip Code 75074	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. LUNGREN FOR CONGRESS		Transaction ID: SB23.4351 Date of Disbursement M M / D D / Y Y Y Y 09 / 01 / 2005
Mailing Address 9321 Silverbend Lane		Amount of Each Disbursement this Period 500.00
City Elk Grove State CA Zip Code 95624	Category/ Type	
Purpose of Disbursement		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
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 27 / 30

<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. MAC COLLINS FOR CONGRESS		Transaction ID: SB23.4352	
Mailing Address P O BOX 962		Date of Disbursement 09 / 01 / 2005	
City JACKSON	State GA	Zip Code 30233	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Category/Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: GA District: 08		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. MANZULLO, DONALD A.		Transaction ID: SB23.4353	
Mailing Address 792 E Lightsville Rd		Date of Disbursement 09 / 01 / 2005	
City Egan	State IL	Zip Code 61047	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement		Category/Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: IL District: 16		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. OXLEY FOR CONGRESS		Transaction ID: SB23.4354	
Mailing Address PO BOX 2006		Date of Disbursement 09 / 01 / 2005	
City FINDLAY	State OH	Zip Code 45839	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement		Category/Type	
Candidate Name		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	
State: OH District: 04		Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	2000.00
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 28 / 30

<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)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. PETERSON FOR CONGRESS		Transaction ID: SB23.4355 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 5
Mailing Address 26192 Floyd Lake Point Road		Amount of Each Disbursement this Period 500.00
City Detroit Lakes State MN Zip Code 56501		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Raynods for Congress		Transaction ID: SB23.4356 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 5
Mailing Address PO Box 15388		Amount of Each Disbursement this Period 500.00
City Rochester State NY Zip Code 14615		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. TRENT LOTT FOR MISSISSIPPI		Transaction ID: SB23.4357 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 1 / 2 0 0 5
Mailing Address PO BOX 22824		Amount of Each Disbursement this Period 1000.00
City JACKSON State MS Zip Code 39225		
Purpose of Disbursement	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	7500.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 29 / 30

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. MS Ahlert		Transaction ID: SB29.4360 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 0 / 2 0 0 5
Mailing Address 325 Spindle Court		Amount of Each Disbursement this Period 215.00
City Atlanta State GA Zip Code 30350		
Purpose of Disbursement 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) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) B. Harold Croom		Transaction ID: SB29.4358 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 5
Mailing Address 3030 Finely Road		Amount of Each Disbursement this Period 225.00
City Downers Grove State IL Zip Code 60515		
Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/ Type		

Full Name (Last, First, Middle Initial) C. Fidelity Bank		Transaction ID: SB29.4361 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 3 0 / 2 0 0 5
Mailing Address Saandy Springs Circle		Amount of Each Disbursement this Period 40.00
City Atlanta State GA Zip Code 30346		
Purpose of Disbursement 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) ▼	
Category/ Type		

SUBTOTAL of Disbursements This Page (optional) ▶	480.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 30 / 30

<input 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial) A. Glen Squires		Transaction ID: SB29.4359 Date of Disbursement M M / D D / Y Y Y Y 09 / 06 / 2005	
Mailing Address 117 Kearney Lake Road		Amount of Each Disbursement this Period 350.00	
City Halifax State ZZ Zip Code 11111	Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/ Type	
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Disbursements This Page (optional)	350.00
TOTAL This Period (last page this line number only)	830.00