

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		25677.54
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	60909.67									
(c) Total Receipts (from Line 19)	16504.50	191985.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	77414.17	217662.70								
7. Total Disbursements (from Line 31)	31567.58	171816.11								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	45846.59	45846.59								
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
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2340.00	27893.00
(i) Itemized (use Schedule A)	14164.50	164092.16
(ii) Unitemized	16504.50	191985.16
(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)	16504.50	191985.16
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))	16504.50	191985.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16504.50	191985.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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.....	17217.58	86551.11
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	17217.58	86551.11
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	14350.00	85225.00
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	40.00
(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	40.00
29. Other Disbursements.....	0.00	0.00
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))..	31567.58	171816.11
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	31567.58	171816.11

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)	16504.50	191985.16
34. Total Contribution Refunds (from Line 28(d))	0.00	40.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16504.50	191945.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	17217.58	86551.11
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	17217.58	86551.11

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16
(check only one)

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

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

NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Nancy J Becker

Mailing Address 2417 NE 16th Ave

City Portland State OR Zip Code 97212-4229

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

Name of Employer: Portland State University Occupation: Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 80920.C92914
Amount of Each Receipt this Period: 500.00
Receipt

B.

Full Name (Last, First, Middle Initial)
Jeanne Blankenship

Mailing Address 6231 Jack Frost Ct

City Rocklin State CA Zip Code 95765-4234

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

Name of Employer: N/A @ PRESENT Occupation: RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 265.00

Date of Receipt: 08 / 05 / 2008
Transaction ID: 80819.C92596
Amount of Each Receipt this Period: 40.00
Receipt

C.

Full Name (Last, First, Middle Initial)
Mary P Fuhrman

Mailing Address 1932 Prospector Ridge Dr

City Ballwin State MO Zip Code 63011-4808

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

Name of Employer: Coram, Inc. Occupation: Chair of Dietetics

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 08 / 28 / 2008
Transaction ID: 80920.C93096
Amount of Each Receipt this Period: 50.00
Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **590.00**

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: PAGE 7 / 16
(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)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Joyce A Gilbert

Mailing Address Apt 2
14521 Dickens St

City Sherman Oaks State CA Zip Code 91403-3782

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

Name of Employer J.A. Gilbert Associates Occupation Dir. Maryilyn Magaram Ctr.

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 80920.C93086

Amount of Each Receipt this Period
500.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Janet W Gloeckner

Mailing Address 231 West View Street

City Harrisonburg State VA Zip Code 22801

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

Name of Employer JAMES MADISON UNIVERSITY Occupation DIETITIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
08 / 15 / 2008

Transaction ID: 80819.C92735

Amount of Each Receipt this Period
100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Susan P Himburg

Mailing Address Florida International Univ
Dietetics & Nutrition HLS 441

City Miami State FL Zip Code 33199-0001

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

Name of Employer Fl. International Univ. Occupation Professor

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
08 / 28 / 2008

Transaction ID: 80920.C93080

Amount of Each Receipt this Period
250.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **850.00**

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: PAGE 8 / 16
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Elizabeth D Lohmann

Mailing Address 4005 Fort Worth Ave

City State Zip Code
Alexandria VA 22304-1712

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

Name of Employer SELF-EMPLOYED Occupation RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

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

Transaction ID: 80819.C92701

Amount of Each Receipt this Period
250.00

Receipt

B. Full Name (Last, First, Middle Initial)
Jessie M Pavlinac

Mailing Address 13147 Century Dr

City State Zip Code
Oregon City OR 97045-6700

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

Name of Employer N/A @ PRESENT Occupation Clinical Nutrition Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
850.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8	/	2	8	/	2	0	0	8

Transaction ID: 80920.C93085

Amount of Each Receipt this Period
50.00

Receipt

C. Full Name (Last, First, Middle Initial)
Paula H Tsufis

Mailing Address 2328 E 3rd St

City State Zip Code
Duluth MN 55812-1851

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

Name of Employer SELF EMPLOYED Occupation RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

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

Transaction ID: 80819.C92641

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **800.00**

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:		PAGE 9 / 16	
	(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"/> 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)
American Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Constance L Welch		Date of Receipt	
	Mailing Address 704 Nichols Rd		M M / D D / Y Y Y Y 0 8 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: 80920.C92800
	Monona	WI	53716-2562	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	100.00
	Name of Employer Dept. of Health & Family Svcs		Occupation RD	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		200.00		

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	2340.00

**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)

PAGE 10 / 16

<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)
American Dietetic Association Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) American Dietetic Association</p> <p>Mailing Address 120 S Riverside Plz 120 South Riverside Plaza</p> <p>City Chicago State IL Zip Code 60606-3913</p> <p>Purpose of Disbursement PAC Software</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80819.E1916 Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 900.00</p> <p>PAC SOFTWARE</p>
<p>B. Full Name (Last, First, Middle Initial) Printing & Copying Huff</p> <p>Mailing Address 1100 17th St NW</p> <p>City Washington State DC Zip Code 20036-4609</p> <p>Purpose of Disbursement ADAPAC Stationary</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80819.E1913 Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 2339.18</p> <p>ADAPAC STATIONARY</p>
<p>C. Full Name (Last, First, Middle Initial) Membership Marketing Services, Inc.</p> <p>Mailing Address Attn. Fran Carille 1280 Perimeter Parkway</p> <p>City Virginia Beach State VA Zip Code 23454-5689</p> <p>Purpose of Disbursement PAC Fundraising Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80819.E1914 Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 11651.25</p> <p>PAC FUNDRAISING EXPENSES</p>

SUBTOTAL of Disbursements This Page (optional)	14890.43
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 12 / 16

<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)

American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Cape Cod Times

Mailing Address 319 Main St

City
Hyannis

State
MA

Zip Code
02601-4037

Purpose of Disbursement
Thank you ad

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80819.E1917

Date of Disbursement

08 / 06 / 2008

Amount of Each Disbursement this Period

888.00

THANK YOU AD

SUBTOTAL of Disbursements This Page (optional)

888.00

TOTAL This Period (last page this line number only)

17217.58

**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 14 / 16

<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)
American Dietetic Association Political Action Committee

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Democrats Win Seats PAC</p> <p>Mailing Address 1071 Twin Branch Ln</p> <p>City Weston State FL Zip Code 33326-2828</p> <p>Purpose of Disbursement REP. WASSERMAN SCHULTZ (D-FL)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80819.E1918</p> <p>Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p> <p>REP. WASSERMAN SCHULTZ (D-FL)</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Nicolas Sparks for Congress</p> <p>Mailing Address 2499 Main St</p> <p>City Sumiton State AL Zip Code 35148-3615</p> <p>Purpose of Disbursement NICOLAS SPARKS (D-AL-04)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1928</p> <p>Date of Disbursement 08 / 27 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>NICOLAS SPARKS (D-AL-04)</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Leadership for Today and Tomorrow</p> <p>Mailing Address 607 14th St NW Suite 800</p> <p>City Washington State DC Zip Code 20005-2000</p> <p>Purpose of Disbursement REP. XAVIER BECERRA (D-CA-31)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80819.E1920</p> <p>Date of Disbursement 08 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. XAVIER BECERRA (D-CA-31)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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 15 / 16

<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)
American Dietetic Association Political Action Committee

A. Full Name (Last, First, Middle Initial) Congressman Fred Upton <hr/> Mailing Address UPTON FOR ALL OF US PO Box 490 <hr/> City St Joseph State MI Zip Code 49085- <hr/> Purpose of Disbursement REP. FRED UPTON (R-MI-6) Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80819.E1915 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 6 / 2 0 0 8
	Amount of Each Disbursement this Period 2000.00 <hr/> REP. FRED UPTON (R-MI-6)
B. Full Name (Last, First, Middle Initial) Tim Walz for US Congress <hr/> Mailing Address PO Box 938 <hr/> City Mankato State MN Zip Code 56002-0938 <hr/> Purpose of Disbursement TIM WALZ (D-MN-01) Candidate Name TIMOTHY J WALZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 01 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80920.E1926 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 100.00 <hr/> TIM WALZ (D-MN-01)

SUBTOTAL of Disbursements This Page (optional) ►

2100.00

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

14350.00

Image# 28933208645

Form/Schedule: **F3XN**
Transaction ID:

Nicolas Sparks for Congress Committee ID# C00449793 and Candidate ID# H8AL04052
