

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
American Hotel and Lodging Association PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
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| | |
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| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| | 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>9</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 9 | | 270125.76 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 9 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 263418.39 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 38842.63 | 54773.26 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 302261.02 | 324899.02 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 20000.00 | 42638.00 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 282261.02 | 282261.02 | | | | | | | | |
| 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 Hotel and Lodging Association PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

 To:

| | |
|---|---|
| M | M |
| 0 | 3 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 9 |

| 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 | 33526.63 | 48482.26 |
| (i) Itemized (use Schedule A) | 4316.00 | 5291.00 |
| (ii) Unitemized | 37842.63 | 53773.26 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 0.00 | 0.00 |
| (b) Political Party Committees | 1000.00 | 1000.00 |
| (c) Other Political Committees (such as PACs) | 38842.63 | 54773.26 |
| (d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | | |
| 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)) | 38842.63 | 54773.26 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 38842.63 | 54773.26 |

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..... | 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..... | 20000.00 | 42500.00 |
| 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 | 138.00 |
| (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 | 138.00 |
| 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)).. | 20000.00 | 42638.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 20000.00 | 42638.00 |

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 | 38842.63 | 54773.26 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 138.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 38842.63 | 54635.26 |
| 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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 22
(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 Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Kirby D Payne, CHA

Mailing Address 327 Village Road

City State Zip Code
Tiverton RI 02878-4264

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

Name of Employer: HVS/American Hospitality Management Co
Occupation: President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 03 / 02 / 2009
Transaction ID: 5002428
Amount of Each Receipt this Period: 1000.00

B. Full Name (Last, First, Middle Initial)
Marlene M. Colucci

Mailing Address 1201 New York Ave., NW Suite 600

City State Zip Code
Washington DC 20005-3917

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

Name of Employer: American Hotel & Lodging Association
Occupation: Executive Vice President, Public Polic

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.72

Date of Receipt: 03 / 02 / 2009
Transaction ID: 5002429
Amount of Each Receipt this Period: 227.36

C. Full Name (Last, First, Middle Initial)
Mr. Joe Martin, CHA

Mailing Address 717 East Hall of Fame Avenue

City State Zip Code
Stillwater OK 74075-5449

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

Name of Employer: Stillwater Hospitality, LLC
Occupation: Owner/Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 454.54

Date of Receipt: 03 / 02 / 2009
Transaction ID: 5002430
Amount of Each Receipt this Period: 227.27

SUBTOTAL of Receipts This Page (optional) ► 1454.63

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Jeffrey E. Brown

Mailing Address 9333 North Meridian Street
Suite 203

City Indianapolis State IN Zip Code 46260-1821

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

Name of Employer Schahet Hotels, Inc. Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 03 / 05 / 2009
Transaction ID: 5007511
Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial)
Mr. Toma G. Brashear

Mailing Address P.O. Box 12412

City Atlanta State GA Zip Code 30355-2412

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

Name of Employer Hospitality Artists, LLC Occupation Chairman

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 03 / 09 / 2009
Transaction ID: 5010941
Amount of Each Receipt this Period 1000.00

C. Full Name (Last, First, Middle Initial)
Mr. Pragna J Patel

Mailing Address 2050 Garfield Street

City San Luis Obispo State CA Zip Code 93401-2636

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

Name of Employer Days Inn San Luis Obispo Occupation General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 03 / 10 / 2009
Transaction ID: 5014093
Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) ► 1750.00

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 8 / 22 |
| | <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 Hotel and Lodging Association PAC

| | | | | |
|---|---|---------------------------------------|---|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) Mr. Gary Mendell | | Date of Receipt | |
| | Mailing Address 101 Merritt 7 Corporate Park 1st Floor | | M M / D D / Y Y Y Y Y 03 / 10 / 2009 | |
| | City | State | Zip Code | Transaction ID: 5014096 |
| | Norwalk | CT | 06851 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. C | | 5000.00 | |
| Name of Employer HEI Hotels and Resorts | | Occupation Chief Executive Officer | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | | |
| | | 5000.00 | | |

| | | | | |
|---|---|--------------------------|---|------------------------------------|
| B. | Full Name (Last, First, Middle Initial) Mr. Thomas J. Baltimore, Jr. | | Date of Receipt | |
| | Mailing Address 3 Bethesda Metro Center, Suite 100 | | M M / D D / Y Y Y Y Y 03 / 10 / 2009 | |
| | City | State | Zip Code | Transaction ID: 5014099 |
| | Bethesda | MD | 20814-6347 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. C | | 5000.00 | |
| Name of Employer RLJ Development, LLC | | Occupation President | | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | | |
| | | 5000.00 | | |

| | | | | |
|---|---|---|---|------------------------------------|
| C. | Full Name (Last, First, Middle Initial) Joel M. Eisemann | | Date of Receipt | |
| | Mailing Address 1 Marriott Drive | | M M / D D / Y Y Y Y Y 03 / 11 / 2009 | |
| | City | State | Zip Code | Transaction ID: 5027924 |
| | Washington | DC | 20058-0001 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. C | | 250.00 | |
| Name of Employer Marriott International, Inc. | | Occupation EVP, Owner & Franchise Services | | |
| 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) | ▶ | 10250.00 |
| 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 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. John R. Campbell

Mailing Address 2000 Spindrift Drive

City State Zip Code
La Jolla CA 92037-3237

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
La Jolla Beach & Tennis Club General Manager

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1250.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 12 / 2009

Transaction ID: 5028722

Amount of Each Receipt this Period
1250.00

B. Full Name (Last, First, Middle Initial)
Mr. Charles G. Pinkowski

Mailing Address 5885 Ridgeway Center Pkwy.
Suite 102

City State Zip Code
Memphis TN 38120-4011

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Pinkowski & Company Owner

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 950.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 5069071

Amount of Each Receipt this Period
950.00

C. Full Name (Last, First, Middle Initial)
Mr. Hasmukh P Rama

Mailing Address 60 Pointe Circle

City State Zip Code
Greenville SC 29615-3568

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
JHM Hotels Chairman & CEO

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1400.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 18 / 2009

Transaction ID: 5069072

Amount of Each Receipt this Period
1400.00

SUBTOTAL of Receipts This Page (optional) 3600.00

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 10 / 22 |
| | <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 Hotel and Lodging Association PAC

A.

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) Mr. Gerald Chase | | Date of Receipt MM / DD / YYYY 03 / 18 / 2009 |
| Mailing Address Two Corporate Drive | | Transaction ID: 5069128 |
| City Shelton | State CT | Zip Code 06484-6224 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 600.00 |
| Name of Employer New Castle Hotels, LLC | Occupation President & Chief Operations Officer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 600.00 | |

B.

| | | |
|---|------------------------------------|---|
| Full Name (Last, First, Middle Initial) Kirk Greenwood | | Date of Receipt MM / DD / YYYY 03 / 18 / 2009 |
| Mailing Address 128 NE 37th St. | | Transaction ID: 5069129 |
| City Oklahoma City | State OK | Zip Code 73105-2516 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 935.00 |
| Name of Employer Auto-Chlor Services, LLC | Occupation Regional Manager | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 935.00 | |

C.

| | | |
|---|-------------------------------------|---|
| Full Name (Last, First, Middle Initial) Janine Jones Smith | | Date of Receipt MM / DD / YYYY 03 / 18 / 2009 |
| Mailing Address 310 Opera Ct. | | Transaction ID: 5069130 |
| City Silver Spring | State MD | Zip Code 20901-5040 |
| FEC ID number of contributing federal political committee. C | | Amount of Each Receipt this Period 1550.00 |
| Name of Employer Akin Gump Et. Al. | Occupation Associate | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1550.00 | |

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 3085.00 |
| TOTAL This Period (last page this line number only) | |

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Michael M. Dickens

Mailing Address 3 Bethesda Metro Center, Suite M02

City State Zip Code
Bethesda MD 20814-6343

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

Name of Employer Hospitality Partners LLC Occupation President

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 5069141

Amount of Each Receipt this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Mr. Keith Overton

Mailing Address 6000 Gulf Road

City State Zip Code
St Pete Beach FL 33706-3712

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

Name of Employer Tradewinds Sandpiper Hotel & Suites Occupation General Manager

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 5069142

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Donald Johnson, CHA

Mailing Address 1699 South Palm Canyon Drive

City State Zip Code
Palm Springs CA 92264-8343

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

Name of Employer Vagabond Inn Occupation Owner

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
03 / 18 / 2009

Transaction ID: 5069170

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► **1750.00**

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 12 / 22
(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"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | 17 |

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NAME OF COMMITTEE (In Full)
American Hotel and Lodging Association PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Pedro Mandoki, CHA

Mailing Address P.O. Box 6296

City State Zip Code
Gulf Shores AL 36547-6296

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

Name of Employer Occupation
Mandoki Hospitality Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1035.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 5069171

Amount of Each Receipt this Period
1035.00

B.

Full Name (Last, First, Middle Initial)
Mr. John A. Belden

Mailing Address 3340 Players Club Parkway Suite 200

City State Zip Code
Memphis TN 38125-8942

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

Name of Employer Occupation
Davidson Hotel Company President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 5069172

Amount of Each Receipt this Period
500.00

C.

Full Name (Last, First, Middle Initial)
Mr. Minaz Abji

Mailing Address 6903 Rockledge Drive Suite 1500

City State Zip Code
Bethesda MD 20817-1862

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

Name of Employer Occupation
Host Hotels & Resorts, Inc. Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2501.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 5069173

Amount of Each Receipt this Period
2501.00

SUBTOTAL of Receipts This Page (optional) ► **4036.00**

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 13 / 22

(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 Hotel and Lodging Association PAC

A.

Full Name (Last, First, Middle Initial)
Mr. Jags N. Patel

Mailing Address 1721 Pleasant Place

City State Zip Code
Arlington TX 76015-4529

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

Name of Employer Occupation
Q Hotels President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1001.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 9

Transaction ID: 5069174

Amount of Each Receipt this Period

1001.00

B.

Full Name (Last, First, Middle Initial)
Mr. Paul W. Whetsell

Mailing Address 4501 N. Fairfax Drive

City State Zip Code
Arlington VA 22203-1656

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

Name of Employer Occupation
Interstate Hotels Resorts Chairman

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 9

Transaction ID: 5069175

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Ms. Mary Jo T. McCulloch

Mailing Address 1205 Stonewood Ct.

City State Zip Code
Annapolis MD 21409-5440

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

Name of Employer Occupation
Maryland Hotel & Lodging Association President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 3 / 1 8 / 2 0 0 9

Transaction ID: 5069176

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

2251.00

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 14 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Moez S Mangalji

Mailing Address 5847 San Felipe Street, #4650

City State Zip Code
Houston TX 77057-3277

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

Name of Employer Westmont Hospitality Group Occupation Principal

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 5069191

Amount of Each Receipt this Period
2800.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas P. Murray

Mailing Address Three Ravinia Drive, Suite 100

City State Zip Code
Atlanta GA 30346-2121

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

Name of Employer InterContinental Hotel Group Occupation Chief Operating Officer, The Americas

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
MM / DD / YYYY
03 / 18 / 2009

Transaction ID: 5069244

Amount of Each Receipt this Period
500.00

C. Full Name (Last, First, Middle Initial)
Mr. Gerald Chase

Mailing Address Two Corporate Drive

City State Zip Code
Shelton CT 06484-6224

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

Name of Employer New Castle Hotels, LLC Occupation President & Chief Operations Officer

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
MM / DD / YYYY
03 / 19 / 2009

Transaction ID: 5073797

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **3400.00**

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 15 / 22
(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 Hotel and Lodging Association PAC

A.

Full Name (Last, First, Middle Initial)
Ms. Denise M. Coll

Mailing Address 1111 Westchester Avenue

City State Zip Code
White Plains NY 10604-3525

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

Name of Employer
Starwood Hotels & Resorts
Worldwide, I

Occupation
President, North American division

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2009

Transaction ID: 5079744

Amount of Each Receipt this Period
500.00

B.

Full Name (Last, First, Middle Initial)
Mr. Robert Scott Warren

Mailing Address 6600 N. Mannheim Road

City State Zip Code
Rosemont IL 60018-3625

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

Name of Employer
Montclair Hotel Investors,
Inc.

Occupation
Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
03 / 26 / 2009

Transaction ID: 5081153

Amount of Each Receipt this Period
250.00

C.

Full Name (Last, First, Middle Initial)
Mr. Joe Martin, CHA

Mailing Address 717 East Hall of Fame Avenue

City State Zip Code
Stillwater OK 74075-5449

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

Name of Employer
Stillwater Hospitality,
LLC

Occupation
Owner/Operator

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1654.54

Date of Receipt
MM / DD / YYYY
03 / 30 / 2009

Transaction ID: 5084589

Amount of Each Receipt this Period
1200.00

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1950.00 |
| TOTAL This Period (last page this line number only) | ▶ | 33526.63 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | | | |
|---|------------------------------|---|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 16 / 22 | |
| | (check only one) | | | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input checked="" 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 Hotel and Lodging Association PAC

| | | | | |
|---|--|-------------------------------------|---------------------------------------|------------------------------------|
| A. | Full Name (Last, First, Middle Initial) The Walt Disney Company | | Date of Receipt | |
| | Mailing Address 1150 17th St. NW Ste. 400 | | M M / D D / Y Y Y Y 03 / 26 / 2009 | |
| | City | State | Zip Code | Transaction ID: 5081254 |
| | Washington | DC | 20036 | Amount of Each Receipt this Period |
| | FEC ID number of contributing federal political committee. | | 1000.00 | |
| | Name of Employer | | Occupation | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ 1000.00 | | |

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

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

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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 Hotel and Lodging Association PAC

| | | | | | | | | | | | | | | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| <p>A. Full Name (Last, First, Middle Initial) Bright For Congress</p> <p>Mailing Address P.O.Box 2106</p> <p>City Montgomery State AL Zip Code 36102</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Mr. Bobby Bright</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AL District: 02</p> | <p>Transaction ID: 5002566 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1500.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 2 | | 2 | 0 | 0 | 9 | 1500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 2 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>B. Full Name (Last, First, Middle Initial) DeMint for Senate Committee, Inc</p> <p>Mailing Address PO Box 2776</p> <p>City Arlington State VA Zip Code 22202</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name James DeMint</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: SC District:</p> | <p>Transaction ID: 5005515 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 4 | | 2 | 0 | 0 | 9 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 4 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>C. Full Name (Last, First, Middle Initial) Friends Of Erik Paulsen</p> <p>Mailing Address 250 Prairie Center Drive</p> <p>City Eden Prairie State MN Zip Code 55344</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Erik Paulsen</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: MN District: 03</p> | <p>Transaction ID: 5006426 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 0 | 4 | | 2 | 0 | 0 | 9 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 0 | 4 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1" style="width: 100%;"><tr><td style="text-align: center;">3500.00</td></tr></table> | 3500.00 |
| 3500.00 | | |
| TOTAL This Period (last page this line number only) | <table border="1" style="width: 100%;"><tr><td style="text-align: center;"> </td></tr></table> | |
| | | |

**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)
American Hotel and Lodging Association PAC

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) Senate Majority Fund | Transaction ID: 5007502 Date of Disbursement 03 / 05 / 2009 |
| | Mailing Address U.S. Senator Jon Kyl 507 Capitol Court | Amount of Each Disbursement this Period 2500.00 |
| | City Washington State DC Zip Code 20002 | |
| | Purpose of Disbursement | 011 Category/Type |
| | Candidate Name | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: District: | |

| | | |
|----|---|---|
| B. | Full Name (Last, First, Middle Initial) Friends of John Thune | Transaction ID: 5007732 Date of Disbursement 03 / 06 / 2009 |
| | Mailing Address 912 F Street NW #1106 | Amount of Each Disbursement this Period 2500.00 |
| | City Washington State DC Zip Code 20004 | |
| | Purpose of Disbursement | 011 Category/Type |
| | Candidate Name Sen. John Thune | |
| | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: SD District: | |

| | | |
|----|---|---|
| C. | Full Name (Last, First, Middle Initial) Jim Costa For Congress | Transaction ID: 5007733 Date of Disbursement 03 / 06 / 2009 |
| | Mailing Address 2037 W Bullard Avenue # 355 | Amount of Each Disbursement this Period 1000.00 |
| | City Fresno State CA Zip Code 93711 | |
| | Purpose of Disbursement | 011 Category/Type |
| | Candidate Name Rep. James Costa | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| | State: CA District: 20 | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 6000.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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 Hotel and Lodging Association PAC

| | | |
|----|---|--|
| A. | Full Name (Last, First, Middle Initial) Schock For Congress | Transaction ID: 5017749 Date of Disbursement 03 / 10 / 2009 |
| | Mailing Address 209 Pennsylvania Ave. SE, Suite 22 | Amount of Each Disbursement this Period 1000.00 |
| | City Washington State DC Zip Code 20003 | |
| | Purpose of Disbursement | 011 Category/ Type |
| | Candidate Name Mr. Aaron Schock | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) Volunteers For Shimkus | Transaction ID: 5017750 Date of Disbursement 03 / 10 / 2009 |
| | Mailing Address PO Box 5458 | Amount of Each Disbursement this Period 1000.00 |
| | City Springfield State IL Zip Code 62705 | |
| | Purpose of Disbursement | 011 Category/ Type |
| | Candidate Name Rep. John M. Shimkus | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|--|
| C. | Full Name (Last, First, Middle Initial) McKeon for Congress | Transaction ID: 5080614 Date of Disbursement 03 / 25 / 2009 |
| | Mailing Address 307 Cannon HOB | Amount of Each Disbursement this Period 1000.00 |
| | City Washington State DC Zip Code 20515 | |
| | Purpose of Disbursement | 011 Category/ Type |
| | Candidate Name Howard McKeon | |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 25 | Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | 3000.00 |
| 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 20 / 22

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 Hotel and Lodging Association PAC

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) Friends Of Farr <hr/> Mailing Address 555 Capitol Mall Suite 1425 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Sam Farr <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 5080838 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 1000.00 |
| | 011 Category/ Type |
| | |
| | |

| | |
|---|---|
| B. Full Name (Last, First, Middle Initial) Senate Majority Fund <hr/> Mailing Address U.S. Senator Jon Kyl 507 Capitol Court <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 5080952 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 1000.00 |
| | 011 Category/ Type |
| | |
| | |

| | |
|---|---|
| C. Full Name (Last, First, Middle Initial) Mary Bono Mack Committee <hr/> Mailing Address 7315 Wisconsin Avenue Suite 310 East <hr/> City Bethesda State MD Zip Code 20814 <hr/> Purpose of Disbursement <hr/> Candidate Name Rep. Mary Bono Mack <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 45 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: 5080962 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 0 9 |
| | Amount of Each Disbursement this Period 2000.00 |
| | 011 Category/ Type |
| | |
| | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 4000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21b | <input type="checkbox"/> 22 | <input checked="" type="checkbox"/> 23 | <input type="checkbox"/> 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 Hotel and Lodging Association PAC

| | | | | | | | | | | | | | | | | | | | | | | |
|--|--|---|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|---------|
| <p>A. Full Name (Last, First, Middle Initial) John Campbell For Congress</p> <p>Mailing Address 700 12th St. NW Suite 700</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. John Campbell</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: CA District: 48</p> | <p>Transaction ID: 5081180 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>B. Full Name (Last, First, Middle Initial) Michaud For Congress</p> <p>Mailing Address 213 Lisbon Street</p> <p>City Lewiston State ME Zip Code 04240</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Mr. Michael Michaud</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ME District: 00</p> | <p>Transaction ID: 5081183 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>500.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | 500.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | | |
| <p>C. Full Name (Last, First, Middle Initial) Simpson For Congress</p> <p>Mailing Address 1487 Parkway Drive</p> <p>City Blackfoot State ID Zip Code 83221</p> <p>Purpose of Disbursement 011 Category/ Type</p> <p>Candidate Name Rep. Michael K. Simpson</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: ID District: 02</p> | <p>Transaction ID: 5081184 Date of Disbursement <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | 1000.00 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | | |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|--|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1" style="width: 100%;"><tr><td>2500.00</td></tr></table> | 2500.00 |
| 2500.00 | | |
| TOTAL This Period (last page this line number only) | <table border="1" style="width: 100%;"><tr><td> </td></tr></table> | |
| | | |

**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 22 / 22

| | | | | | |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 Hotel and Lodging Association PAC

A.

Full Name (Last, First, Middle Initial)
Boyd For Congress

Transaction ID: 5081187

Date of Disbursement

Mailing Address P.O. Box 15703

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | | 2 | 6 | | 2 | 0 | 0 | 9 |

City Tallahassee State FL Zip Code 32317

Amount of Each Disbursement this Period

| |
|---------|
| 1000.00 |
|---------|

Purpose of Disbursement

| |
|-------------------|
| 011 |
| Category/ Type |

Candidate Name
Rep. Allen Boyd

Office Sought: House
 Senate
 President
State: FL District: 02

Disbursement For: 2010
 Primary General
 Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 1000.00 |
|---------|

TOTAL This Period (last page this line number only)

| |
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| 20000.00 |
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