

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
American Dietetic Association Political Action Committee

ADDRESS (number and street) 1120 Connecticut Ave. NW, Suite 48
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00143560
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 09 01 2008 through 09 30 2008

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 M. Stephanie Patrick

Signature of Treasurer Electronically Filed by M. Stephanie Patrick Date 10 15 2008

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

Office Use Only									
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FEC FORM 3X
(Rev. 12/2004)

**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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	45846.59									
(c) Total Receipts (from Line 19)	14183.00	206168.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	60029.59	231845.70								
7. Total Disbursements (from Line 31)	18901.76	190717.87								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	41127.83	41127.83								
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	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	1110.00	29003.00
(i) Itemized (use Schedule A)	13073.00	177165.16
(ii) Unitemized	14183.00	206168.16
(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)	14183.00	206168.16
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))	14183.00	206168.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14183.00	206168.16

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.....	3176.76	89727.87
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3176.76	89727.87
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	15675.00	100900.00
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	50.00	90.00
(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))	50.00	90.00
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))..	18901.76	190717.87
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18901.76	190717.87

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)	14183.00	206168.16
34. Total Contribution Refunds (from Line 28(d))	50.00	90.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14133.00	206078.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3176.76	89727.87
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3176.76	89727.87

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 17
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
Karen T Bellesky

Mailing Address Apt 906
4000 N Charles St

City Baltimore State MD Zip Code 21218-1762

FEC ID number of contributing federal political committee. C

Name of Employer Chase Brexton Occupation REGISTERED DIETITIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 29 / 2008
Transaction ID: 81013.C93243
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 ▼ 305.00

Date of Receipt 09 / 11 / 2008
Transaction ID: 80920.C92983
Amount of Each Receipt this Period 40.00
Receipt

C. Full Name (Last, First, Middle Initial)
Abby S Bloch

Mailing Address Apt 12n
340 E 64th St

City New York State NY Zip Code 10021-7519

FEC ID number of contributing federal political committee. C

Name of Employer PRIVATE PRACTICE Occupation RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 09 / 2008
Transaction ID: 80920.C92980
Amount of Each Receipt this Period 100.00
Receipt

SUBTOTAL of Receipts This Page (optional) 640.00

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 17
	<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) Shelly R Duncan	Date of Receipt MM / DD / YYYY 09 / 22 / 2008
	Mailing Address 2014 Ices Ferry Drive	Transaction ID: 81013.C93147
	City State Zip Code Morgantown WV 26508	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation UNEMPLOYED RD Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 200.00	

B.	Full Name (Last, First, Middle Initial) Betty A Krauss	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 1134 Maplegrove Dr Nw	Transaction ID: 80920.C93050
	City State Zip Code Grand Rapids MI 49504-3838	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Mary Free Bed Rehabilitat- ion H Manger, Nutrition Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 200.00	

C.	Full Name (Last, First, Middle Initial) Helen W Lane	Date of Receipt MM / DD / YYYY 09 / 11 / 2008
	Mailing Address 858 Ramada Dr	Transaction ID: 80920.C92986
	City State Zip Code Houston TX 77062	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation National Aeronautics and Space DIETITIAN Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	370.00
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 / 17	
	(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) Mary Pat Raimondi		Date of Receipt	
	Mailing Address 1895 Lincoln Ave		M M / D D / Y Y Y Y 09 / 09 / 2008	
	City	State	Zip Code	Transaction ID: 80920.C92956
	Saint Paul	MN	55105-1422	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.		C	100.00
	Name of Employer SELF EMPLOYED		Occupation Partner	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)	▶	1110.00

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

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) Mike Morgan Photography	Transaction ID: 81013.E1957 Date of Disbursement 09 / 25 / 2008
	Mailing Address P.O. Box 39165	
	City Washington State DC Zip Code 20016-	Amount of Each Disbursement this Period 539.00
	Purpose of Disbursement Photos for event	Category/ Type
	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) ▼
		PHOTOS FOR EVENT

B.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 80920.E1933 Date of Disbursement 09 / 04 / 2008
	Mailing Address 1050 Connecticut Ave NW	
	City Washington State DC Zip Code 20036-5308	Amount of Each Disbursement this Period 147.00
	Purpose of Disbursement PAC Mailing	Category/ Type
	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) ▼
		PAC MAILING

C.	Full Name (Last, First, Middle Initial) Ronald Smith	Transaction ID: 80920.E1935 Date of Disbursement 09 / 11 / 2008
	Mailing Address Ste 480 1120 Connecticut Ave Nw	
	City Washington State DC Zip Code 20036-3989	Amount of Each Disbursement this Period 1183.51
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	Category/ Type
	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) ▼
		REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)	▶	1869.51
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)
Sheraton Pasadena Hotel

Mailing Address 303 East Cordova Street

City Pasadena State CA Zip Code 91101-

Purpose of Disbursement
Travel - Rep. Becerra (D-CA) event

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80920.E1938
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: TRAVEL - REP. BECERRA (D-CA) EVENT

B. Full Name (Last, First, Middle Initial)
Hertz Car Rental

Mailing Address Denver Airport

City Denver State CO Zip Code 80249-

Purpose of Disbursement
Travel - Rep. Becerra (D-CA) event

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80920.E1937
Date of Disbursement

/ /

Amount of Each Disbursement this Period

[MEMO ITEM]

MEMO: TRAVEL - REP. BECERRA (D-CA) EVENT

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

Mailing Address Ste 480
1120 Connecticut Ave Nw

City Washington State DC Zip Code 20036-3989

Purpose of Disbursement
Travel - Fundraiser Rep. Becerra

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Transaction ID: 80920.E1951
Date of Disbursement

/ /

Amount of Each Disbursement this Period

TRAVEL - FUNDRAISER REP. BECERRA

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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) Ronald Smith <hr/> Mailing Address Ste 480 1120 Connecticut Ave Nw <hr/> City Washington State DC Zip Code 20036-3989 <hr/> Purpose of Disbursement REIMBURSEMENT: SEE BELOW Candidate Name <hr/> 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) ▼	Transaction ID: 81013.E1952 Date of Disbursement 09 / 22 / 2008
	Amount of Each Disbursement this Period 849.24 REIMBURSEMENT: SEE BELOW
B. Full Name (Last, First, Middle Initial) Pine Needles Lodge and Golf Club <hr/> Mailing Address 1005 Midland Road <hr/> City Southern Pines State NC Zip Code 28387- <hr/> Purpose of Disbursement Travel reimbursement - Sen. Burr Candidate Name <hr/> 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) ▼	Transaction ID: 81013.E1953 Date of Disbursement 09 / 22 / 2008
	Amount of Each Disbursement this Period 541.30 [MEMO ITEM] MEMO: TRAVEL REIMBURSEMENT - SEN. BURR

SUBTOTAL of Disbursements This Page (optional) ►

849.24

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

3176.76

**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 / 17

<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. Full Name (Last, First, Middle Initial) Citizens for Callahan</p> <p>Mailing Address P.O. Box 9458</p> <p>City Peoria State IL Zip Code 61612-</p> <p>Purpose of Disbursement COLLEEN CALLAHAN (D-IL-18)</p> <p>Candidate Name COLLEEN CALLAHAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81013.E1962 Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 300.00</p> <p>COLLEEN CALLAHAN (D-IL-18)</p>
<p>B. Full Name (Last, First, Middle Initial) Congresswoman Lois Capps</p> <p>Mailing Address FRIENDS OF LOIS CAPPS P.O. Box 23940</p> <p>City Santa Barbara State CA Zip Code 93121-</p> <p>Purpose of Disbursement REP. LOIS CAPPS (D-CA-23)</p> <p>Candidate Name LOIS G CAPPS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 23</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1943 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. LOIS CAPPS (D-CA-23)</p>
<p>C. Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress</p> <p>Mailing Address 530 Seminole Dr</p> <p>City Erie State PA Zip Code 16505-2428</p> <p>Purpose of Disbursement KATHY DAHLKEMPER (D-PA-03)</p> <p>Candidate Name KATHLEEN ANN DAHLKEMPER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1944 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 3125.00</p> <p>KATHY DAHLKEMPER (D-PA-03)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4425.00

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 Dietetic Association Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) John S Fund</p> <p>Mailing Address P.O. Box 853</p> <p>City Edwardsville State IL Zip Code 62025-</p> <p>Purpose of Disbursement REP. JOHN SHIMKUS (R-IL-19)</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.E1931 Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. JOHN SHIMKUS (R-IL-1-9)</p>
<p>B. Full Name (Last, First, Middle Initial) Griffith for Congress</p> <p>Mailing Address PO Box 2916</p> <p>City Huntsville State AL Zip Code 35804-</p> <p>Purpose of Disbursement PARKER GRIFFITH (D-AL-5)</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.E1939 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>PARKER GRIFFITH (D-AL-5)</p>
<p>C. Full Name (Last, First, Middle Initial) Cathy McMorris for Congress</p> <p>Mailing Address P.O. Box 137</p> <p>City Spokane State WA Zip Code 99210-</p> <p>Purpose of Disbursement REP. CATHY MCMORRIS ROGERS (R-WA)</p> <p>Candidate Name CATHY MCMORRIS RODGERS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1946 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. CATHY MCMORRIS ROGERS (R-WA)</p>

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)

<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. Full Name (Last, First, Middle Initial) Congresswoman Betty McCollum</p> <p>Mailing Address MCCOLLUM FOR CONGRESS P.O. Box 14131</p> <p>City Saint Paul State MN Zip Code 55114-</p> <p>Purpose of Disbursement REP. BETTY MCCOLLUM (D-MN-4)</p> <p>Candidate Name BETTY MCCOLLUM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1929 Date of Disbursement: 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>REP. BETTY MCCOLLUM (D-MN-4)</p>
<p>B. Full Name (Last, First, Middle Initial) Jeff Merkley for Oregon</p> <p>Mailing Address P.O. Box 29136</p> <p>City Portland State OR Zip Code 97296-</p> <p>Purpose of Disbursement JEFF MERKLEY (D-OR)</p> <p>Candidate Name JEFFREY ALAN MERKLEY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1932 Date of Disbursement: 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>JEFF MERKLEY (D-OR)</p>
<p>C. Full Name (Last, First, Middle Initial) Congressman Tim F. Murphy</p> <p>Mailing Address Murphy for Congress 46 Ordale Rd</p> <p>City Pittsburgh State PA Zip Code 15228-</p> <p>Purpose of Disbursement REP. TIM MURPHY (R-PA-18)</p> <p>Candidate Name TIM MURPHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81013.E1958 Date of Disbursement: 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p> <p>REP. TIM MURPHY (R-PA-18)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3250.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:
(check only one)

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<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. Full Name (Last, First, Middle Initial) Congresswoman Janice D. Schakowsky</p> <p>Mailing Address Schakowsky for Congress P.O. Box 5130</p> <p>City Evanston State IL Zip Code 60204-</p> <p>Purpose of Disbursement REP. JAN SCHAKOWSKY (D-IL-9)</p> <p>Candidate Name JANICE D SCHAKOWSKY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: IL District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1947 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. JAN SCHAKOWSKY (D-IL-9)</p>
<p>B. Full Name (Last, First, Middle Initial) Jeanne Shaheen for Senate</p> <p>Mailing Address PO Box 1510</p> <p>City Manchester State NH Zip Code 03105-1510</p> <p>Purpose of Disbursement JEANNE SHAHEEN FOR SENATE</p> <p>Candidate Name JEANNE SHAHEEN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NH District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80920.E1945 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>JEANNE SHAHEEN FOR SENATE</p>
<p>C. Full Name (Last, First, Middle Initial) Stivers for Congress</p> <p>Mailing Address 81 S. Fifth Street</p> <p>City Columbus State OH Zip Code 43215-</p> <p>Purpose of Disbursement STEVE STIVERS (R-OH-15)</p> <p>Candidate Name STEVE STIVERS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: OH District: 15</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 81013.E1961 Date of Disbursement 09 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>STEVE STIVERS (R-OH-15)</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

FOR LINE NUMBER:
(check only one)

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<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 Patrick J. Tiberi	Transaction ID: 80920.E1930 Date of Disbursement 09 / 04 / 2008	
	Mailing Address Tiberi for Congress 217 3rd Street, SE	Amount of Each Disbursement this Period 1000.00
City Washington State DC Zip Code 20003-	Purpose of Disbursement REP. PAT TIBERI (R-OH-12) Candidate Name PATRICK J TIBERI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OH District: 12	
REP. PAT TIBERI (R-OH-12)		Category/ Type
B. Full Name (Last, First, Middle Initial) Friends of Mark Warner	Transaction ID: 80920.E1942 Date of Disbursement 09 / 16 / 2008	
	Mailing Address 201 N Union St Suite 350	Amount of Each Disbursement this Period 1000.00
City Alexandria State VA Zip Code 22314-2642	Purpose of Disbursement MARK WARNER (D-VA) Candidate Name MARK ROBERT WARNER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: VA District: 00	
MARK WARNER (D-VA)		Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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15675.00

Image# 28992630805

Form/Schedule: **F3XN**

Parker Griffith, candidate # H8AL05109, House (5th District)

Transaction ID:
