

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. **12FE4M5**
U.S. Travel Association PAC

ADDRESS (number and street) 1100 New York Avenue
Suite 450W
Washington DC 20005-3934
 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00457754 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 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 (12S)
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 08 / 01 / 2020 through 08 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Djaouga, Contina, , ,
Type or Print Name of Treasurer

Signature of Treasurer Djaouga, Contina, , , [Electronically Filed] Date 09 / 11 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

U.S. Travel Association PAC

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>	<input type="text" value="296612.59"/>	<input type="text" value="296612.59"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="210241.02"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1511.66"/>	<input type="text" value="26639.59"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="211752.68"/>	<input type="text" value="323252.18"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="9539.50"/>	<input type="text" value="121039.00"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="202213.18"/>	<input type="text" value="202213.18"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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

U.S. Travel Association PAC

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	1351.66	10393.76
(ii) Unitemized	160.00	3745.83
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1511.66	14139.59
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1511.66	24139.59
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	2500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	1511.66	26639.59
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1511.66	26639.59

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	39.50	539.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	39.50	539.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	120500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	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)) ..	9539.50	121039.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9539.50	121039.00

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1511.66	24139.59
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1511.66	24139.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	39.50	539.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	39.50	539.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 6 OF 12
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Briggs, Angie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 New York Ave NW # 450
 City Washington State DC Zip Code 20005-3934
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President, Industry Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2940.00

Date of Receipt 08 / 31 / 2020
Transaction ID : A8F06B0AD108745439EE
 Amount of Each Receipt this Period 420.00
 Memo Item
 Payroll Deduction: \$210.00/Bi-Weekly

B. Cowlishaw, Ben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1111 Army Navy Dr Apt 1019
 City Arlington State VA Zip Code 22202-2039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Manager, Grassroots & PAC
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt 08 / 31 / 2020
Transaction ID : A8FAB49CCF68F4E04A40
 Amount of Each Receipt this Period 20.00
 Memo Item
 Payroll Deduction: \$10.00/Bi-Weekly

C. Glenn, Treon, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1613 Isherwood St NE Apt 2
 City Washington State DC Zip Code 20002-5531
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Senior Director, Government Relations
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 31 / 2020
Transaction ID : A0755D1EB2EF14DDFAC8
 Amount of Each Receipt this Period 90.00
 Memo Item
 Payroll Deduction: \$45.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	530.00
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 OF 12
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Hansen, Erik, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1125 11th St NW
 Apt 603
 City Washington State DC Zip Code 20001-6425
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President of Government Relations
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1200.00

Date of Receipt 08 / 31 / 2020
Transaction ID : A79471AB0EA504D0AA0B
 Amount of Each Receipt this Period 150.00
 Memo Item
 Payroll Deduction: \$75.00/Bi-Weekly

B. Holmberg, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8334 Ridge Crossing Ln
 City Springfield State VA Zip Code 22152-3562
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Vice President, Program & Marketing S
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt 08 / 31 / 2020
Transaction ID : AC4B46C4C00D74E9C87B
 Amount of Each Receipt this Period 45.00
 Memo Item
 Payroll Deduction: \$22.50/Bi-Weekly

C. Kennedy, Timothy, C, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1834 Massachusetts Ave SE
 City Washington State DC Zip Code 20003-2530
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Senior Director, Strategic Communicati
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2020
Transaction ID : AFBBA2A9FC26B466AA94
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	235.00
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 OF 12
	<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)
U.S. Travel Association PAC

A. Marchand, Djenane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3548 N Dickerson St
 City Arlington State VA Zip Code 22207-2908
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) SVP, Membership & Industry Relations;
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2933.28

Date of Receipt 08 / 31 / 2020
Transaction ID : A1317B3861F3342EDB6C
 Amount of Each Receipt this Period 366.66
 Memo Item
 Payroll Deduction: \$183.33/Bi-Weekly

B. Sandberg, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8820 Dayton Ave
 City North Beach State MD Zip Code 20714-4081
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Meeting Planner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 240.00

Date of Receipt 08 / 31 / 2020
Transaction ID : AE201EE4C8E5F482BB8E
 Amount of Each Receipt this Period 30.00
 Memo Item
 Payroll Deduction: \$15.00/Bi-Weekly

C. Shields, Sarah, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8118 Chester St
 City Takoma Park State MD Zip Code 20912-7339
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Director, Industry Communications
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt 08 / 31 / 2020
Transaction ID : A4FBCAA822DF04E5BAE2
 Amount of Each Receipt this Period 40.00
 Memo Item
 Payroll Deduction: \$20.00/Bi-Weekly

SUBTOTAL of Receipts This Page (optional).....	436.66
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 OF 12
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Vance, Adam, , ,

Mailing Address 1645 Lozano Dr

City Vienna State VA Zip Code 22182-1947

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

Name of Employer (for Individual) U.S. Travel Association Occupation (for Individual) Executive Vice President, Operations

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1200.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 31 / 2020

Transaction ID : A478E498DA3804749926

Amount of Each Receipt this Period
150.00

Memo Item
Payroll Deduction: \$75.00/Bi-Weekly

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
TOTAL This Period (last page this line number only).....▶	1351.66

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. PNC Bank

Full Name (Last, First, Middle Initial)

Mailing Address 833 7th St NW

City Washington State DC Zip Code 20001-3717

Purpose of Disbursement Bank Fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 08 / 11 / 2020

FEC Identification Number: C

Transaction ID : BA4E4EAB2c

Amount of Each Disbursement this Period: 29.50

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	29.50
TOTAL This Period (last page this line number only).....▶	29.50

**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"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

A. MCCARTHY VICTORY FUND

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 30844

M M M	/	D D D	/	Y Y Y Y Y
08		24		2020

City Bethesda State MD Zip Code 20824-0844

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00541011
---	-----------

Candidate Name
MCCARTHY VICTORY FUND

011

Category/
Type

Transaction ID : B3E9C3AA43

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) Other

1000.00

Memo Item

B. PERLMUTTER FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 3440 YOUNGFIELD STREET
#264

M M M	/	D D D	/	Y Y Y Y Y
08		24		2020

City WHEAT RIDGE State CO Zip Code 80033

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00410639
---	-----------

Candidate Name
Perlmutter, Ed, , ,

011

Category/
Type

Transaction ID : BC76BB5872

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify)

1000.00

Memo Item

C. RECLAIM AMERICA PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 228 S. Washington St.
Ste. 115

M M M	/	D D D	/	Y Y Y Y Y
08		24		2020

City Alexandria State VA Zip Code 22314-5404

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00500025
---	-----------

Candidate Name
RECLAIM AMERICA PAC

011

Category/
Type

Transaction ID : B0A0A91A1E

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2020
 Primary General
 Other (specify) Other

4000.00

Memo Item

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

6000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. SHAHEEN FOR SENATE COMMITTEE

Full Name (Last, First, Middle Initial)
Mailing Address 1010 Vermont Ave, NW
Suite 814

City Washington State DC Zip Code 20005-4957

Purpose of Disbursement Contribution to Committee

Candidate Name Shaheen, Jeanne, , ,

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NH District:

Date of Disbursement 08 / 24 / 2020

FEC Identification Number C C00368506
Transaction ID : BEDA99D123
Amount of Each Disbursement this Period 2500.00

Memo Item

B. WYDEN FOR SENATE

Full Name (Last, First, Middle Initial)
Mailing Address PO Box 3498

City Portland State OR Zip Code 97208-3498

Purpose of Disbursement Contribution to Committee

Candidate Name Wyden, Ron, , ,

Office Sought: House Senate President

Disbursement For: 2022 Primary General Other (specify)

State: OR District:

Date of Disbursement 08 / 24 / 2020

FEC Identification Number C C00308676
Transaction ID : BFF22B02E3
Amount of Each Disbursement this Period 1000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

FEC Identification Number C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	3500.00
TOTAL This Period (last page this line number only).....▶	9500.00