REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION COMMISSION
MAIL ROOM

APR 20 11 37 AM '98

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
INN/PAC
International Association of Holiday Inn

ADDRESS (number and street) ☐ Check if different than previously reported
Three Ravinia Drive Suite 2000

CITY, STATE and ZIP CODE
Atlanta, Ga 30346

2. FEC IDENTIFICATION NUMBER
C-000848222

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ 12-Day Pre-Election Report for the _____ (Type of Election) election on _____ in the State of _____

☐ 30-Day Post-Election Report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 1/1/98 through 3/31/98		
6. (a) Cash on Hand January 1, 19 98		$ 4,293.56
(b) Cash on Hand at Beginning of Reporting Period	$ 4,293.56	
(c) Total Receipts (from Line 19)	$ 16,150.00	$ 16,150.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 20,443.56	$ 20,443.56
7. Total Disbursements (from Line 30)	$ 4,819.43	$ 4,819.43
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 15,624.13	$ 15,624.13
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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 James R. McCauley

Signature of Treasurer James R. McCauley

Date 4-6-98

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

FEC FORM 3X
(revised 9/93)

FE7AN047

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: TNN/PAC C-00084222

REPORT COVERING PERIOD FROM 1/1/98 TO: 3/31/98

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)	8,400.00	8,400.00	11(a)(i)
ii. Unitemized	7,750.00	7,750.00	11(a)(ii)
iii. Total (add i and ii) ➤			11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	16,150.00	16,150.00	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees			16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	16,150.00	16,150.00	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	16,150.00	16,150.00	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures			21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤			21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees	(500.00)	(500.00)	23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	5,319.43	5,319.43	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	4,819.43	4,819.43	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤			31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)			32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)			34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤			35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤			37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A

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)
INN/PAC C-00084822

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Doug Owings P. O. Box 750305 Memphis, TN 38175-0305 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Holiday Inn Space Center Occupation: Management Aggregate Year-to-Date > $ 300.00	1/8/98	300.00
L. F. Harper II P. O. Box 1246 Great Bend, KS 67530 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Harper Construction Occupation: Management Aggregate Year-to-Date > $ 300.00	1/13/98	300.00
Richard Jabara 105 Newtown Rd. Danbury, CT 06810 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Motel Hotel Assoc. Occupation: Management Aggregate Year-to-Date > $ 300.00	1/9/98	300.00
George Glover 2910 Carden Lane Memphis, TN 38111 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Wilson Hotel Occupation: Management Aggregate Year-to-Date > $ 300.00	1/14/98	300.00
Larry Blumberg 3002 Foxridge Rd. Dothan, AL 36303 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Larry Blumberg & Assoc. Occupation: Management Aggregate Year-to-Date > $ 450.00	1/16/98	450.00
Walter Duncan P. O. Box 9012 - 815 Colorado Ave. Stuart, FL 34995 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Walter Duncan Inc. Occupation: Management Aggregate Year-to-Date > $ 300.00	1/28/98	300.00
Quintin Blair P. O.Box 30 Cody, WY 82414 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Quintin Blair Enterprises, Inc. Occupation: Management Aggregate Year-to-Date > $ 300.00	1/20/98	300.00

SUBTOTAL of Receipts This Page (optional) 2,250.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)

INN/PAC C-000848222

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Sam Friedman 228 Pratt Lane Natchitoches, LA 71457 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Holiday Inn Covington Occupation: Management Aggregate Year-to-Date $ 900.00	1/27/98	900.00
B. E & H Goldfine 227 W 1st. Suite 610 Duluth, Minnesota 55802 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Holiday Inn Saginaw MI Occupation: Management Aggregate Year-to-Date $ 300.00	1/7/98	300.00
C. Robert Alter P. O.Box 4240 San Clemente, CA 92674 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Sunstone Properties Occupation: Management Aggregate Year-to-Date $ 300.00	1/20/98	300.00
D. G. Leroy Lail P. O. Box 1669 Hickory, NC 28603 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Hickory Furniture Mart Occupation: Management Aggregate Year-to-Date $ 450.00	1/27/98	450.00
E. Charles R. Johnson 9250 Baymeadows Rd. Suite 200 Jacksonville, FL 32256 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Landcom Orange Park Ltd. Occupation: Management Aggregate Year-to-Date $ 750.00	2/17/98	750.00
F. Philip Murphey 1750 Shoreline Rd. Orange Park, FL 32073 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Murphco of Florida Occupation: Management Aggregate Year-to-Date $ 300.00	2/13/98	300.00
G. Michael Hoffman 43 Axbridge Lane Delmar, NY 12054 Receipt For: [ ] Primary [X] General [ ] Other (specify):	Turf Hotels Occupation: Management Aggregate Year-to-Date $ 350.00	2/6/98	350.00

SUBTOTAL of Receipts This Page (optional) 3,350.00

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

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SCHEDULE A **ITEMIZED RECEIPTS**

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

FOR LINE NUMBER 11A

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NAME OF COMMITTEE (In Full)
INN/PAC C-000848222

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. Bill Hart 609 Dingens St. Suite 101 Buffalo, NY 14206	Hart Hotels Management	1/29/98	600.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 600.00		
B. Dennis Cilley 17100 So. Hatsted St.	Inn Development & Mgmt. Management	2/18/98	600.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 600.00		
C. Chris Carlstead 2518 Brookwood Flossmoor, ILL 60422	Inn Development & Management Management	2/23/98	600.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 600.00		
D. Asher Travis 2591 Brighton Cir. Biloxi, MS 39531	Holiday Inns Management	2/21/98	600.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 600.00		
E. Mike Gallucci 2857 Riviera Dr. Ste. 100 Akron, OH 44333	Riviera Executive Properties Management	3/11/98	400.00
Receipt For: [ ] Primary [X] General [ ] Other (specify):	Aggregate Year-to-Date > $ 400.00		
F. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
Receipt For: [ ] Primary [ ] General [ ] Other (specify):	Aggregate Year-to-Date > $		

SUBTOTAL of Receipts This Page (optional)	2,800.00
TOTAL This Period (last page this line number only)	8,400.00

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

INN/PAC C-000848222

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary, General, Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. IAHI Three Ravinia Dr. Suite 2000 Atlanta, GA 30346	Letterhead & Brochures [X] Other (specify)	3/11/98	5,176.36
B. Suntrust Bank P. O. Box 4418 Atlanta, GA	1120 POL 12/97 Tax Year [X] Other (specify)	3/12/98	67.00
C. Suntrust Bank PO Box 4418 Atlanta, GA 30302	Svc. Charge [X] Other (specify)	3/31/98	56.02
D. Suntrust Bank PO Box 4418 Atlanta, GA 30302	Checks [X] Other (specify)	2/28/98	20.05
E.			
F.			
G.			
H.			
I.			

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

TOTAL This Period (last page this line number only) 5,319.43

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)

INN/PAC C-00084822

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
Hoke for Congress '96 P. O. Box 26290 Fairview Park, OH 44126	Contribution Refund Disbursement for: ☐ Primary ☐ General ☒ Other (specify)	3/31/98	(500.00)
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	(500.00)

FE7AH047

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 04/15/98
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

RS
PREPARER

04/20/98
DATE PREPARED

(4/98)