

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 08 01 2007 through 08 31 2007

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 11 08 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		51371.81
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	53587.53									
(c) Total Receipts (from Line 19)	15572.21	151202.96								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	69159.74	202574.77								
7. Total Disbursements (from Line 31)	26254.25	156107.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	42905.49	46467.49								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	8

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	8

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	975.00	21382.00
(i) Itemized (use Schedule A)	14597.21	129810.96
(ii) Unitemized	15572.21	151192.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	0.00
(b) Political Party Committees	0.00	10.00
(c) Other Political Committees (such as PACs)	0.00	151202.96
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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))	15572.21	151202.96
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	15572.21	151202.96

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.....	13254.25	80582.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	13254.25	80582.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	13000.00	75500.00
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	25.00
(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	25.00
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))..	26254.25	156107.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	26254.25	156107.28

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)	15572.21	151202.96
34. Total Contribution Refunds (from Line 28(d))	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	15572.21	151177.96
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	13254.25	80582.28
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	13254.25	80582.28

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 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)
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 ▼ 500.00

Date of Receipt
08 / 31 / 2007

Transaction ID: 70917.C86650

Amount of Each Receipt this Period
500.00

Receipt

B. Full Name (Last, First, Middle Initial)
Carol J Gilmore

Mailing Address 3424 Doral Ct

City Lawrence State KS Zip Code 66047-2131

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

Name of Employer LAWRENCE MEMORIAL HOSPITAL Occupation RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
08 / 30 / 2007

Transaction ID: 70917.C86594

Amount of Each Receipt this Period
200.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mary E Kunkel

Mailing Address 111 Hillcrest Ave

City Clemson State SC Zip Code 29631-1309

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

Name of Employer Clemson University Occupation Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt
08 / 27 / 2007

Transaction ID: 70917.C86495

Amount of Each Receipt this Period
275.00

Receipt

SUBTOTAL of Receipts This Page (optional)	975.00
TOTAL This Period (last page this line number only)	975.00

**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

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

Full Name (Last, First, Middle Initial) A. Aristotle International		Transaction ID: 70815.E1710 Date of Disbursement MM / DD / YYYY 08 / 10 / 2007
Mailing Address 205 Pennsylvania Ave SE		Amount of Each Disbursement this Period 1586.25
City Washington State DC Zip Code 20003-1164	GRASSROOT MANAGER	
Purpose of Disbursement GRASSROOT MANAGER Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) B. Membership Marketing Services, Inc.		Transaction ID: 70815.E1711 Date of Disbursement MM / DD / YYYY 08 / 10 / 2007
Mailing Address Attn. Fran Carille 1280 Perimeter Parkway		Amount of Each Disbursement this Period 7654.60
City Virginia Beach State VA Zip Code 23454-5689	FUNDRAISING EXPENSES FOR THE PAC	
Purpose of Disbursement FUNDRAISING EXPENSES FOR THE PAC Candidate Name		Category/Type
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) ▼

Full Name (Last, First, Middle Initial) C. Membership Marketing Services, Inc.		Transaction ID: 70917.E1715 Date of Disbursement MM / DD / YYYY 08 / 21 / 2007
Mailing Address Attn. Fran Carille 1280 Perimeter Parkway		Amount of Each Disbursement this Period 3113.07
City Virginia Beach State VA Zip Code 23454-5689	FUNDRAISING EXPENSES FOR THE PAC	
Purpose of Disbursement FUNDRAISING EXPENSES FOR THE PAC Candidate Name		Category/Type
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) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	12353.92
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

Full Name (Last, First, Middle Initial) A. U.S. Postal Service		Transaction ID: 70815.E1708 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 7
Mailing Address 1050 Connecticut Ave NW		Amount of Each Disbursement this Period 231.00
City Washington State DC Zip Code 20036-5308	PAC MAILINGS	
Purpose of Disbursement PAC MAILINGS		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) ▼	

Full Name (Last, First, Middle Initial) B. U.S. Postal Service		Transaction ID: 70917.E1713 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 1050 Connecticut Ave NW		Amount of Each Disbursement this Period 55.90
City Washington State DC Zip Code 20036-5308	PAC MAILING FOR FNCE	
Purpose of Disbursement PAC MAILING FOR FNCE		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) ▼	

Full Name (Last, First, Middle Initial) C. U.S. Postal Service		Transaction ID: 70917.E1712 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 6 / 2 0 0 7
Mailing Address 1050 Connecticut Ave NW		Amount of Each Disbursement this Period 143.50
City Washington State DC Zip Code 20036-5308	PAC MAILING FOR FNCE	
Purpose of Disbursement PAC MAILING FOR FNCE		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) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	430.40
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

Full Name (Last, First, Middle Initial) A. Sir Speedy		Transaction ID: 70815.E1709 Date of Disbursement 08 / 10 / 2007	
Mailing Address 115 N Charles St		Amount of Each Disbursement this Period 363.29	
City Baltimore State MD Zip Code 21201-3801	Purpose of Disbursement ADAPAC SUPPLIES	Category/ Type ADAPAC SUPPLIES	
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) ▼		

Full Name (Last, First, Middle Initial) B. Sir Speedy		Transaction ID: 70917.E1714 Date of Disbursement 08 / 21 / 2007	
Mailing Address 115 N Charles St		Amount of Each Disbursement this Period 106.64	
City Baltimore State MD Zip Code 21201-3801	Purpose of Disbursement ADAPAC FNCE POSTCARD	Category/ Type ADAPAC FNCE POSTCARD	
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) ▼		

SUBTOTAL of Disbursements This Page (optional)

469.93

TOTAL This Period (last page this line number only)

13254.25

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 12

<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

Full Name (Last, First, Middle Initial) A. Congressman Earl Blumenauer		Transaction ID: 70917.E1719 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address BLUMENAUER FOR CONGRESS 830 NE Holliday, Suite 105		Amount of Each Disbursement this Period 500.00
City Portland	State OR	
Zip Code 97232-		SUPPORT FOR REP. EARL BLUMENAUER
Purpose of Disbursement SUPPORT FOR REP. EARL BLUMENAUER		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) B. Eric Cantor		Transaction ID: 70917.E1720 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 8 / 2 0 0 7
Mailing Address P.O. Box 17813		Amount of Each Disbursement this Period 2500.00
City Richmond	State VA	
Zip Code 23226-		SUPPORT FOR REP. ERIC CANTOR
Purpose of Disbursement SUPPORT FOR REP. ERIC CANTOR		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

Full Name (Last, First, Middle Initial) C. Congressman John D. Dingell		Transaction ID: 70917.E1718 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address JOHN D DINGELL FOR CONGRESS COMMIT P.O. Box 75214		Amount of Each Disbursement this Period 1000.00
City Washington	State DC	
Zip Code 20013-		SUPPORT FOR REP. JOHN DINGELL
Purpose of Disbursement SUPPORT FOR REP. JOHN DINGELL		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: _____ District: _____		

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)

PAGE 11 / 12

<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

Full Name (Last, First, Middle Initial) A. Senator Tom Harkin		Transaction ID: 71108.E1771 Date of Disbursement 08 / 27 / 2007
Mailing Address CITIZENS FOR HARKIN 426 C Street, NE		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20002-		REDESIGNATED FUNDS G-2008
Purpose of Disbursement REDESIGNATED FUNDS G-2008		
Candidate Name		Category/ Type
Office Sought: <input 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: District:		

Full Name (Last, First, Middle Initial) B. Senator Tom Harkin		Transaction ID: 71108.E1770 Date of Disbursement 08 / 27 / 2007
Mailing Address CITIZENS FOR HARKIN 426 C Street, NE		Amount of Each Disbursement this Period 2500.00
City Washington	State DC	
Zip Code 20002-		SUPPORT SEN. HARKIN
Purpose of Disbursement SUPPORT SEN. HARKIN		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Kagen4Congress		Transaction ID: 70815.E1706 Date of Disbursement 08 / 03 / 2007
Mailing Address 100 W College Ave Ste 50D 50-D		Amount of Each Disbursement this Period 1000.00
City Appleton	State WI	
Zip Code 54911-5749		SUPPORT FOR REP. STEVE KA- GEN
Purpose of Disbursement SUPPORT FOR REP. STEVE KAGEN		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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)

PAGE 12 / 12

<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

Full Name (Last, First, Middle Initial) A. Rep. Allyson Schwartz		Transaction ID: 70917.E1716 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 7 / 2 0 0 7
Mailing Address P.O. Box 2282		Amount of Each Disbursement this Period 2000.00
City Jenkintown State PA Zip Code 19046-	Purpose of Disbursement SUPPORT FOR REP. ALLYSON SCHWARTZ	
Candidate Name	Category/Type	SUPPORT FOR REP. ALLYSON SCHWARTZ
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Congressman Patrick J. Tiberi		Transaction ID: 70815.E1707 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 3 / 2 0 0 7
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 SUPPORT FOR REP. PAT TIBERI	
Candidate Name	Category/Type	SUPPORT FOR REP. PAT TIBERI
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <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) ►

13000.00