

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 Hotel and Lodging Association PAC

ADDRESS (number and street) 1201 New York Avenue, NW
Sixth Floor
 Check if different than previously reported. (ACC)
Washington DC 20005-3931

2. **FEC IDENTIFICATION NUMBER** C00001198
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 06 01 2007 through 06 30 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 Joori Jeon

Signature of Treasurer Electronically Filed by Joori Jeon Date 07 19 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 Hotel and Lodging Association PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| 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 | <table border="1" style="width: 100%;"><tr><td> </td></tr></table> | | <table border="1" style="width: 100%;"><tr><td align="center">277043.71</td></tr></table> | 277043.71 |
| Y | Y | Y | Y | | | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | | | |
| | | | | | | | | | | | | |
| 277043.71 | | | | | | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | <table border="1" style="width: 100%;"><tr><td align="center">314860.71</td></tr></table> | 314860.71 | | | | | | | | | | |
| 314860.71 | | | | | | | | | | | | |
| (c) Total Receipts (from Line 19) | <table border="1" style="width: 100%;"><tr><td align="center">21787.00</td></tr></table> | 21787.00 | <table border="1" style="width: 100%;"><tr><td align="center">132604.00</td></tr></table> | 132604.00 | | | | | | | | |
| 21787.00 | | | | | | | | | | | | |
| 132604.00 | | | | | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | <table border="1" style="width: 100%;"><tr><td align="center">336647.71</td></tr></table> | 336647.71 | <table border="1" style="width: 100%;"><tr><td align="center">409647.71</td></tr></table> | 409647.71 | | | | | | | | |
| 336647.71 | | | | | | | | | | | | |
| 409647.71 | | | | | | | | | | | | |
| 7. Total Disbursements (from Line 31) | <table border="1" style="width: 100%;"><tr><td align="center">32000.00</td></tr></table> | 32000.00 | <table border="1" style="width: 100%;"><tr><td align="center">105000.00</td></tr></table> | 105000.00 | | | | | | | | |
| 32000.00 | | | | | | | | | | | | |
| 105000.00 | | | | | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <table border="1" style="width: 100%;"><tr><td align="center">304647.71</td></tr></table> | 304647.71 | <table border="1" style="width: 100%;"><tr><td align="center">304647.71</td></tr></table> | 304647.71 | | | | | | | | |
| 304647.71 | | | | | | | | | | | | |
| 304647.71 | | | | | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table> | 0.00 | | | | | | | | | | |
| 0.00 | | | | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | <table border="1" style="width: 100%;"><tr><td align="center">0.00</td></tr></table> | 0.00 | | | | | | | | | | |
| 0.00 | | | | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Hotel and Lodging Association PAC

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 6 |

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

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 0 | 6 |

| | |
|---|---|
| D | D |
| 3 | 0 |

| | | | |
|---|---|---|---|
| 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 | 18412.00 | 122129.00 |
| (i) Itemized (use Schedule A) | 2625.00 | 7725.00 |
| (ii) Unitemized | 21037.00 | 129854.00 |
| (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) | 21037.00 | 129854.00 |
| 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 | 750.00 | 1000.00 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 0.00 | 1750.00 |
| 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)) | 21787.00 | 132604.00 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 21787.00 | 132604.00 |

DETAILED SUMMARY PAGE

of Disbursements

| II. DISBURSEMENTS | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share..... | 0.00 | 0.00 |
| (ii) Non-Federal Share..... | 0.00 | 0.00 |
| (b) Other Federal Operating Expenditures..... | 0.00 | 0.00 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 0.00 | 0.00 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 0.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 33000.00 | 105000.00 |
| 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 | 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..... | -1000.00 | 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)).. | 32000.00 | 105000.00 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31)..... | 32000.00 | 105000.00 |

DETAILED SUMMARY PAGE
of Disbursements

| III. Net Contributions/Operating Expenditures | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans) from Line 11(d), page 3) | 21037.00 | 129854.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 21037.00 | 129854.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 0.00 | 0.00 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 0.00 | 0.00 |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 6 / 25 |
| | (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 |

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

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

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) A. James F. Anhut | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7 |
| Mailing Address Three Ravina Drive Suite 2900 | | Transaction ID: R10189 |
| City State Zip Code Atlanta GA 30346 | Amount of Each Receipt this Period 1000.00 | |
| FEC ID number of contributing federal political committee. C | | Credit Card |
| Name of Employer InterContinental Hotel Group | Occupation Senior Vice President of Brand Development | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1000.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) B. Mr. Walt Baker | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7 |
| Mailing Address 644 West IRis Drive | | Transaction ID: R10158 |
| City State Zip Code Nashville TN 37204 | Amount of Each Receipt this Period 100.00 | |
| FEC ID number of contributing federal political committee. C | | Cash |
| Name of Employer Tennessee Hotel and Lodging Association | Occupation CEO | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 1100.00 | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. Mr. Steven Bartolin, Jr. | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7 |
| Mailing Address 1 Lake Avenue | | Transaction ID: R10149 |
| City State Zip Code Colorado Springs CO 80906 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | | Check |
| Name of Employer The Broadmoor Hotel | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1600.00 |
| TOTAL This Period (last page this line number only) ▶ | [] |

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

| | | |
|--|------------------------------|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 7 / 25 |
| | (check only one) | |
| <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 12 | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> 17 |

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

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

Mailing Address 1735 Peachtree St. NE
Suite 223

City Atlanta State GA Zip Code 30309

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

Name of Employer Hospitality Artists, LLC Occupation Chairman

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 26 / 2007

Transaction ID: R10184

Amount of Each Receipt this Period
800.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. W. David P Carey, III

Mailing Address 3701 C Diamond Head Road

City Honolulu State HI Zip Code 96816

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

Name of Employer Outrigger Enterprises Occupation CEO and President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2500.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 05 / 2007

Transaction ID: R10151

Amount of Each Receipt this Period
2500.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Douglas C. Collins

Mailing Address 7080 Brandon Mill Road

City Atlanta State GA Zip Code 30328

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

Name of Employer America's Best Franchising Occupation Chief Executive Officer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1445.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 28 / 2007

Transaction ID: R10195

Amount of Each Receipt this Period
675.00

Credit Card

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 3975.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**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 8 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
Mr. Douglas C. Collins

Mailing Address 7080 Brandon Mill Road

City Atlanta State GA Zip Code 30328

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

Name of Employer America's Best Franchising Occupation Chief Executive Officer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1445.00

Date of Receipt
06 / 28 / 2007

Transaction ID: R10199

Amount of Each Receipt this Period
325.00

Credit Card

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

Mailing Address 1201 New York Ave., NW Suite 600

City Washington State DC Zip Code 20005

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

Name of Employer AH&LA Occupation Executive Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
06 / 28 / 2007

Transaction ID: R10196

Amount of Each Receipt this Period
350.00

Credit Card

C. Full Name (Last, First, Middle Initial)
Mr. Patrick A Corso

Mailing Address 195 Inverrary Road

City Pinehurst State NC Zip Code 28374

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

Name of Employer National Resort Management Group, LLC Occupation Managing Partner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt
06 / 05 / 2007

Transaction ID: R10152

Amount of Each Receipt this Period
500.00

Check

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1175.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**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 9 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
Mr. Joseph Geis

Mailing Address 3608 S. Broadway

City State Zip Code
Edmond OK 73083

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

Name of Employer Occupation
Sleep Inn & Suites Edmond Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2007

Transaction ID: R10188

Amount of Each Receipt this Period
100.00

Check

B. Full Name (Last, First, Middle Initial)
Ms. Nancy D Gray, CHA

Mailing Address 162 Main Street

City State Zip Code
Freeport ME 04032

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

Name of Employer Occupation
Harraseeket Inn & Inn at Mystic CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2007

Transaction ID: R10140

Amount of Each Receipt this Period
250.00

Check

C. Full Name (Last, First, Middle Initial)
Ms. Sheila Hartman

Mailing Address 21300 Victory Blvd Suite 215

City State Zip Code
Woodland Hills CA 91367

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

Name of Employer Occupation
Financial Independence Co. President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
2496.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2007

Transaction ID: R10143

Amount of Each Receipt this Period
416.00

Credit Card

| | |
|--|---------------|
| SUBTOTAL of Receipts This Page (optional) | 766.00 |
| TOTAL This Period (last page this line number only) | |

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 10 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) A. Steve Hewlett | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7 | |
| Mailing Address 5544 Hill Road | | Transaction ID: R10198 | |
| City State Zip Code Brentwood TN 37027 | Amount of Each Receipt this Period 750.00 | | |
| FEC ID number of contributing federal political committee. C | Credit Card | | |
| Name of Employer American Hotel and Lodging Association | Occupation Consultant | Aggregate Year-to-Date ▼ 750.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) B. Ms. Pam Hewlett Inman | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7 | |
| Mailing Address 7018 Ellendale Drive | | Transaction ID: R10156 | |
| City State Zip Code Brentwood TN 37027 | Amount of Each Receipt this Period 100.00 | | |
| FEC ID number of contributing federal political committee. C | Cash | | |
| Name of Employer American Hotel & Lodging Association | Occupation Senior Vice President | Aggregate Year-to-Date ▼ 1101.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|---|--|---|--|
| Full Name (Last, First, Middle Initial) C. Ms. Pam Hewlett Inman | | Date of Receipt M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 | |
| Mailing Address 7018 Ellendale Drive | | Transaction ID: R10176 | |
| City State Zip Code Brentwood TN 37027 | Amount of Each Receipt this Period 750.00 | | |
| FEC ID number of contributing federal political committee. C | Check | | |
| Name of Employer American Hotel & Lodging Association | Occupation Senior Vice President | Aggregate Year-to-Date ▼ 1101.00 | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | |
|--|---------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 1600.00 |
| TOTAL This Period (last page this line number only) ▶ | |

**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 11 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <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)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Scott K. Joslove

Mailing Address 1701 West Avenue

City State Zip Code
Austin TX 78701-1036

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

Name of Employer: Texas Hotel & Motel Association
Occupation: President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
501.00

Date of Receipt
06 / 15 / 2007

Transaction ID: R10167

Amount of Each Receipt this Period
501.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mr. Joseph R Kane, Jr.

Mailing Address 339 Jefferson Road

City State Zip Code
Parsippany NJ 07054

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

Name of Employer: Days Inn, World Wide
Occupation: President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
06 / 15 / 2007

Transaction ID: R10160

Amount of Each Receipt this Period
1500.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Kevin L Maher

Mailing Address 7 Philadelphia Avenue

City State Zip Code
Takoma Park MD 20912-4336

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

Name of Employer: American Hotel & Lodging Association
Occupation: Vice President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
06 / 15 / 2007

Transaction ID: R10174

Amount of Each Receipt this Period
250.00

Credit Card

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2251.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|---|------------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 12 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <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)
American Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Stephen Marcus

Mailing Address 100 E. Wisconsin Ave., #1900

City Milwaukee State WI Zip Code 53202

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

Name of Employer The Marcus Company Occupation President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
06 / 28 / 2007

Transaction ID: R10202

Amount of Each Receipt this Period
2000.00

Check

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

Mailing Address 525 E. Main Street

City Weatherford State OK Zip Code 73096-5347

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

Name of Employer Hampton Inn & Suites Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1745.00

Date of Receipt
06 / 05 / 2007

Transaction ID: R10144

Amount of Each Receipt this Period
250.00

Credit Card

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

Mailing Address 525 E. Main Street

City Weatherford State OK Zip Code 73096-5347

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

Name of Employer Hampton Inn & Suites Occupation Owner

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1745.00

Date of Receipt
06 / 28 / 2007

Transaction ID: R10201

Amount of Each Receipt this Period
300.00

Credit Card

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 2550.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**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 13 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Full Name (Last, First, Middle Initial)
Shawn McBurney

Mailing Address 4203 Minton Dr.

City State Zip Code
Fairfax VA 22032

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

Name of Employer
American Hotel & Lodging Association

Occupation
Vice President for Govt. Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: R10200

Amount of Each Receipt this Period
550.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Mrs. Ruth M. McInerney

Mailing Address 2126 Connecticut Avenue, NW
Apt. 62

City State Zip Code
Washington DC 20008-1729

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

Name of Employer
American Hotel & Lodging Association

Occupation
Director

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
275.00

Date of Receipt
MM / DD / YYYY
06 / 28 / 2007

Transaction ID: R10197

Amount of Each Receipt this Period
275.00

Credit Card

C. Full Name (Last, First, Middle Initial)
Mr. Glenn Nakamura

Mailing Address 445 Seaside Avenue

City State Zip Code
Honolulu, Oahu HI 96815

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

Name of Employer
Royal Hawaiian Resorts

Occupation
Chairman & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2007

Transaction ID: R10169

Amount of Each Receipt this Period
250.00

Credit Card

| | | |
|--|---|---------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 1075.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

**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 14 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

A. Full Name (Last, First, Middle Initial)
Mr. Mike Patel

Mailing Address 2100 ParklakeDr., NE
Suite A

City Atlanta State GA Zip Code 30345

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

Name of Employer Diplomat Companies Occupation President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2007

Transaction ID: R10172

Amount of Each Receipt this Period
250.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Ms. Linus Raines

Mailing Address Excelsior Hotel
Markham & Louisiana Sts.

City Little Rock State AR Zip Code 72201

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

Name of Employer Green Stamp America, Inc. Occupation Director of Business Development

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 21 / 2007

Transaction ID: R10178

Amount of Each Receipt this Period
300.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Joseph Rook

Mailing Address 10757 S. River Front Parkway
Suite 300

City South Jordan State UT Zip Code 84095

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

Name of Employer iBAHN Occupation Vice President of Sales

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2295.00

Date of Receipt
M M / D D / Y Y Y Y Y
06 / 15 / 2007

Transaction ID: R10155

Amount of Each Receipt this Period
100.00

Cash

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 650.00 |
| TOTAL This Period (last page this line number only) | ▶ | |

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 15 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | <input type="checkbox"/> 17 | |

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Mr. Joseph Rook | | Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2007 |
| Mailing Address 10757 S. River Front Parkway Suite 300 | | Transaction ID: R10162 |
| City State Zip Code South Jordan UT 84095 | Amount of Each Receipt this Period 195.00 | |
| FEC ID number of contributing federal political committee. C | Check | |
| Name of Employer iBAHN | Occupation Vice President of Sales | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 2295.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) B. Mr. Gene Rupnik, CHA | | Date of Receipt M M / D D / Y Y Y Y 06 / 15 / 2007 |
| Mailing Address 113 Country Place | | Transaction ID: R10168 |
| City State Zip Code Springfield IL 62703-5376 | Amount of Each Receipt this Period 500.00 | |
| FEC ID number of contributing federal political committee. C | Credit Card | |
| Name of Employer Rupnik Hospitality Management | Occupation President | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 500.00 | |

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) C. Mr. John J Russell | | Date of Receipt M M / D D / Y Y Y Y 06 / 05 / 2007 |
| Mailing Address 260 Peachtree St, NW Suite 2301 | | Transaction ID: R10146 |
| City State Zip Code Atlanta GA 30303 | Amount of Each Receipt this Period 255.00 | |
| FEC ID number of contributing federal political committee. C | Credit Card | |
| Name of Employer NYLO Hotels | Occupation Chief Executive Officer | |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Aggregate Year-to-Date ▼ 510.00 | |

| | |
|--|--------|
| SUBTOTAL of Receipts This Page (optional) ▶ | 950.00 |
| TOTAL This Period (last page this line number only) ▶ | |

**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 16 / 25 |
| | <input checked="" type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| | <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Full Name (Last, First, Middle Initial)
Ms. Cynthia P. Savage

Mailing Address 200 W. 12th Street

City State Zip Code
Kansas City MO 64105

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

Name of Employer Occupation
Raphael Hotel Group Vice President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 15 / 2007

Transaction ID: R10175

Amount of Each Receipt this Period
250.00

Credit Card

B. Full Name (Last, First, Middle Initial)
Shawn Shaffer

Mailing Address 611 Commerce Street

City State Zip Code
Nashville TN 37203

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

Name of Employer Occupation
Renaissance Nashville Hotel General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 750.00

Date of Receipt
MM / DD / YYYY
06 / 01 / 2007

Transaction ID: R10142

Amount of Each Receipt this Period
750.00

Check

C. Full Name (Last, First, Middle Initial)
Mr. Michael S. Shannon

Mailing Address P.O. Box 1746

City State Zip Code
Rancho Mirage CA 92270

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

Name of Employer Occupation
KSL Recreation Corporation President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1250.00

Date of Receipt
MM / DD / YYYY
06 / 05 / 2007

Transaction ID: R10147

Amount of Each Receipt this Period
625.00

Credit Card

| | |
|--|----------------|
| SUBTOTAL of Receipts This Page (optional) | 1625.00 |
| TOTAL This Period (last page this line number only) | |

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

| | | | | |
|--|------------------------------|------------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | | PAGE 17 / 25 | |
| | (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 Hotel and Lodging Association PAC

A. Full Name (Last, First, Middle Initial)
Mr. Robert L. Steele, III

Mailing Address 2900 Bayport Drive

City Tampa Bay State FL Zip Code 33607-5916

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

Name of Employer Grand Hyatt Tampa Bay Occupation General Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
695.00

Date of Receipt

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 6 | / | 2 | 0 | 0 | 7 |

Transaction ID: R10183

Amount of Each Receipt this Period
195.00

Credit Card

| | | |
|--|---|----------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 195.00 |
| TOTAL This Period (last page this line number only) | ▶ | 18412.00 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|--|------------------------------|--|
| Use separate schedule(s) or each category of the Detailed Summary Page | FOR LINE NUMBER: | PAGE 18 / 25 |
| | (check only one) | |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input checked="" type="checkbox"/> 15 |
| | | <input type="checkbox"/> 12 |
| | | <input type="checkbox"/> 16 |
| | | <input type="checkbox"/> 17 |

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

A. Full Name (Last, First, Middle Initial)
Marriott PAC

Mailing Address Marriott Drive
Dept 904

City State Zip Code
Washington DC 20058

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
750.00

Date of Receipt
 M M / D D / Y Y Y Y
 0 6 / 1 5 / 2 0 0 7

Transaction ID: R10166

Amount of Each Receipt this Period
750.00

Check

| | | |
|--|---|--------|
| SUBTOTAL of Receipts This Page (optional) | ▶ | 750.00 |
| TOTAL This Period (last page this line number only) | ▶ | 750.00 |

**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)

PAGE 19 / 25

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

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Chambliss for Senate | | Transaction ID: D3030 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 |
| Mailing Address PO Box 12469 | | Amount of Each Disbursement this Period 500.00 |
| City Atlanta State GA Zip Code 30355 | Category/ Type | |
| Purpose of Disbursement Contr. | | |
| Candidate Name Saxby Chambliss | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA 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. Chambliss for Senate | | Transaction ID: D3031 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 |
| Mailing Address PO Box 12469 | | Amount of Each Disbursement this Period 500.00 |
| City Atlanta State GA Zip Code 30355 | Category/ Type | |
| Purpose of Disbursement Contr. | | |
| Candidate Name Saxby Chambliss | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) C. Collins for Senator | | Transaction ID: D3027 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7 |
| Mailing Address PO Box 1096 | | Amount of Each Disbursement this Period 1000.00 |
| City Bangor State ME Zip Code 04402 | Category/ Type | |
| Purpose of Disbursement Contr. | | |
| Candidate Name Susan M. Collins | | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 2000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

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

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

| | | |
|---|--|--|
| Full Name (Last, First, Middle Initial) A. Committee to Elect Lindsey Graham | | Transaction ID: D3038 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7 |
| Mailing Address P.O. Box 1155 PO Box 1155 | | Amount of Each Disbursement this Period 1000.00 |
| City Seneca State SC Zip Code 29679 | Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Lindsey O. Graham Category/Type <input type="checkbox"/> | |
| Office Sought: <input checked="" 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: SC District: 03 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) B. Committee to Elect Nydia M Velazquez | | Transaction ID: D3042 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7 |
| Mailing Address 315 Inspiration Lane | | Amount of Each Disbursement this Period 1500.00 |
| City Gaithersburg State MD Zip Code 20878 | Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Nydia M. Velazquez Category/Type <input type="checkbox"/> | |
| Office Sought: <input checked="" 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: NY District: 12 | | |

| | | |
|---|---|--|
| Full Name (Last, First, Middle Initial) C. Elizabeth Dole Committee | | Transaction ID: D3034 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 |
| Mailing Address P.O. Box 2109 | | Amount of Each Disbursement this Period 1000.00 |
| City Salisbury State NC Zip Code 28145 | Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Elizabeth Dole Category/Type <input type="checkbox"/> | |
| Office Sought: <input type="checkbox"/> House <input checked="" 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: NC District: | | |

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3500.00 |
| 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 21 / 25

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

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

| | | |
|--|--|--|
| A. Enzi for US Senate Full Name (Last, First, Middle Initial) Mailing Address PO Box 2775 City Cody State WY Zip Code 82414 Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Michael B. Enzi Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WY District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D3035 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 Amount of Each Disbursement this Period 1000.00 |
|--|--|--|

| | | |
|---|--|--|
| B. Friends of Bennie Thompson Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 100 City Bolton State MS Zip Code 39041 Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Bennie G. Thompson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D3037 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 Amount of Each Disbursement this Period 1500.00 |
|---|--|--|

| | | |
|--|--|--|
| C. Friends of Farr Full Name (Last, First, Middle Initial) Mailing Address 729 15th Street, NW, 3rd Floor City Washington State DC Zip Code 20005 Purpose of Disbursement Contr. <input type="checkbox"/> Candidate Name Sam Farr Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Transaction ID: D3043 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7 Amount of Each Disbursement this Period 2500.00 |
|--|--|--|

| | |
|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 5000.00 |
| 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 22 / 25

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

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

| | | | |
|--|---|--|--|
| Full Name (Last, First, Middle Initial) A. Jeff Flake for Congress | | Transaction ID: D3026 Date of Disbursement 06 / 06 / 2007 | |
| Mailing Address P.O. Box 21447 | | Amount of Each Disbursement this Period 500.00 | |
| City Mesa State AZ Zip Code 85277 | Purpose of Disbursement Contr. | Category/ Type | |
| Candidate Name Jeff Flake | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 06 | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) B. Lindsey Graham for U.S. Senate | | Transaction ID: D3028 Date of Disbursement 06 / 20 / 2007 | |
| Mailing Address P.O.Box 1155 | | Amount of Each Disbursement this Period 1000.00 | |
| City Seneca State SC Zip Code 29679 | Purpose of Disbursement Contr. | Category/ Type | |
| Candidate Name Lindsey O. Graham | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

| | | | |
|--|--|--|--|
| Full Name (Last, First, Middle Initial) C. McConnell Senate Committee | | Transaction ID: D3029 Date of Disbursement 06 / 21 / 2007 | |
| Mailing Address 400 North Capitol Stree, NW Suite 585 | | Amount of Each Disbursement this Period 1500.00 | |
| City Washington State DC Zip Code 20001 | Purpose of Disbursement Contr. | Category/ Type | |
| Candidate Name Mitch McConnell | Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: | | |
| Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | |

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|--|---------|
| SUBTOTAL of Disbursements This Page (optional) ▶ | 3000.00 |
| TOTAL This Period (last page this line number only) ▶ | |

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

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

FOR LINE NUMBER:
(check only one)

PAGE 23 / 25

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

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

| | | |
|--|--|---|
| Full Name (Last, First, Middle Initial) A. National Republican Congressional Committee | | Transaction ID: D3041 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7 |
| Mailing Address 320 First Street, SE Attn: Danielle Morris James | | Amount of Each Disbursement this Period 15000.00 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Contr. NRCC (-??-R) | |
| 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. TEAM SUNUNU | | Transaction ID: D3036 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7 |
| Mailing Address 1331 H Street, NW 12th Floor | | Amount of Each Disbursement this Period 1000.00 |
| City Washington State DC Zip Code 20005 | Purpose of Disbursement Contr. | |
| Candidate Name John E. Sununu | Category/ Type | |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|---|--|---|
| Full Name (Last, First, Middle Initial) C. The Mike Pence Committee | | Transaction ID: D3025 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 6 / 2 0 0 7 |
| Mailing Address P.O. Box 408 | | Amount of Each Disbursement this Period 1000.00 |
| City Anderson State IN Zip Code 46015 | Purpose of Disbursement Contr. | |
| Candidate Name Mike Pence | Category/ Type | |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 06 | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 17000.00 |
| 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 24 / 25

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

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

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) A. Walberg For Congress | | Transaction ID: D3044 Date of Disbursement 06 / 27 / 2007 | |
| Mailing Address P.O. Box 16021 | | Amount of Each Disbursement this Period 1000.00 | |
| City Alexandria | State VA | Zip Code 22302 | Category/ Type |
| Purpose of Disbursement Contr. Walberg for Congress (MI-7-R) | | | |
| Candidate Name Timothy L. Walberg | | | |
| Office Sought: <input checked="" 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: MI District: 07 | | | |

| | | | |
|---|--|--|-------------------|
| Full Name (Last, First, Middle Initial) B. Walden for Congress | | Transaction ID: D3039 Date of Disbursement 06 / 22 / 2007 | |
| Mailing Address P.O. 1091 | | Amount of Each Disbursement this Period 1500.00 | |
| City Hood River | State OR | Zip Code 97031 | Category/ Type |
| Purpose of Disbursement Contr. | | | |
| Candidate Name Greg Walden | | | |
| Office Sought: <input checked="" 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: OR District: 02 | | | |

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

33000.00

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)

PAGE 25 / 25

| | | | | | |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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

| | | |
|--|--|--|
| Full Name (Last, First, Middle Initial) A. Walberg For Congress | | Transaction ID: D3058 Date of Disbursement 06 / 19 / 2007 |
| Mailing Address 406 First Street, SE Suite 300 | | Amount of Each Disbursement this Period -1000.00 |
| City Washington State DC Zip Code 20003 | Purpose of Disbursement Returned Check #2255 dated 5/17/2007 for 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) ▼ | Timothy L. Walberg (MI-7-R). |

SUBTOTAL of Disbursements This Page (optional) ►

-1000.00

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

-1000.00