

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

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 2009 through 06 30 2009

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 Ms. Joori Jeon

Signature of Treasurer Electronically Filed by Ms. Joori Jeon Date 07 06 2009

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

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

**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	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

	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>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		270125.76
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	255871.28									
(c) Total Receipts (from Line 19)	5884.63	92768.15								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	261755.91	362893.91								
7. Total Disbursements (from Line 31)	16500.00	117638.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	245255.91	245255.91								
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

FEC Form 3X (Rev. 06/2004)

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	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	2689.63	82681.15
(ii) Unitemized	3195.00	9087.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5884.63	91768.15
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	1000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	5884.63	92768.15
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))	5884.63	92768.15
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5884.63	92768.15

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	16500.00	117500.00
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	138.00
(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	138.00
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))..	16500.00	117638.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	16500.00	117638.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	5884.63	92768.15
34. Total Contribution Refunds (from Line 28(d))	0.00	138.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5884.63	92630.15
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 13
	<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 Hotel and Lodging Association PAC

A.	Full Name (Last, First, Middle Initial) Ms. Katherine Moulton	Date of Receipt MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 1620 Gulf of Mexico Drive	Transaction ID: 5224730
	City State Zip Code Longboat Key FL 34228-3403	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
Name of Employer Colony Beach & Tennis Resort	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B.	Full Name (Last, First, Middle Initial) Ms. Marlene M. Colucci	Date of Receipt MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 1201 New York Ave., NW Suite 600	Transaction ID: 5228655
	City State Zip Code Washington DC 20005-3917	Amount of Each Receipt this Period 227.36
	FEC ID number of contributing federal political committee. C	
Name of Employer American Hotel & Lodging Association	Occupation Executive Vice President, Public Polic	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1136.80	

C.	Full Name (Last, First, Middle Initial) Mr. Joe Martin, CHA	Date of Receipt MM / DD / YYYY 06 / 04 / 2009
	Mailing Address 717 East Hall of Fame Avenue	Transaction ID: 5228656
	City State Zip Code Stillwater OK 74075-5449	Amount of Each Receipt this Period 227.27
	FEC ID number of contributing federal political committee. C	
Name of Employer Stillwater Hospitality, LLC	Occupation Owner/Operator	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2336.35	

SUBTOTAL of Receipts This Page (optional)	704.63
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
Mr. Don Lichtenburger, CHA
Mailing Address 2121 East Main
City State Zip Code
Cortez CO 81321-4219
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Holiday Inn Express Cortez Owner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt MM / DD / YYYY
06 / 15 / 2009
Transaction ID: 5245390
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
Mr. Jordan S. Beckner, MHS
Mailing Address P.O. Box 9060
City State Zip Code
Fort Lauderdale FL 33310-9060
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
FiberBuilt Umbrellas VP & Founding Partner
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 235.00
Date of Receipt MM / DD / YYYY
06 / 25 / 2009
Transaction ID: 5253185
Amount of Each Receipt this Period 100.00

C. Full Name (Last, First, Middle Initial)
Ms. Marlene M. Colucci
Mailing Address 1201 New York Ave., NW
Suite 600
City State Zip Code
Washington DC 20005-3917
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
American Hotel & Lodging Association Executive Vice President, Public Polic
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 1171.80
Date of Receipt MM / DD / YYYY
06 / 25 / 2009
Transaction ID: 5253195
Amount of Each Receipt this Period 35.00

SUBTOTAL of Receipts This Page (optional) 635.00
TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 13
(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. Joe Martin, CHA

Mailing Address 717 East Hall of Fame Avenue

City State Zip Code
Stillwater OK 74075-5449

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

Name of Employer Occupation
Stillwater Hospitality, LLC Owner/Operator

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2386.35

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: 5253198

Amount of Each Receipt this Period
50.00

B. Full Name (Last, First, Middle Initial)
Mr. Thomas W Staed, CHA

Mailing Address PO Box 7218

City State Zip Code
Daytona Beach Shor FL 32116-7218

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

Name of Employer Occupation
Staed Family Associates President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
MM / DD / YYYY
06 / 25 / 2009

Transaction ID: 5253235

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Mr. Pedro Mandoki, CHA

Mailing Address P.O. Box 6296

City State Zip Code
Gulf Shores AL 36547-6296

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

Name of Employer Occupation
Mandoki Hospitality Group President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1135.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2009

Transaction ID: 5253701

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional) ► **400.00**

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name (Last, First, Middle Initial)
William Culver

Mailing Address 4654 S Espana St.

City State Zip Code
Centennial CO 80015-5819

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
950.00

Date of Receipt
M M / D D / Y Y Y Y
06 / 29 / 2009

Transaction ID: 5265433

Amount of Each Receipt this Period
950.00

SUBTOTAL of Receipts This Page (optional)	▶	950.00
TOTAL This Period (last page this line number only)	▶	2689.63

**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

A.	Full Name (Last, First, Middle Initial) Richard Burr Committee	Transaction ID: 5211331 Date of Disbursement
	Mailing Address Post Office Box 5928	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Winston-Salem State NC Zip Code 27113	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Sen. Richard M. Burr	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Lisa Murkowski For US Senate	Transaction ID: 5211332 Date of Disbursement
	Mailing Address 900 19th St. NW 8th Floor	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2000.00"/>
	Candidate Name Sen. Lisa Murkowski	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DeMint for Senate Committee, Inc	Transaction ID: 5211333 Date of Disbursement
	Mailing Address PO Box 2776	<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Arlington State VA Zip Code 22202	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1500.00"/>
	Candidate Name James DeMint	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

**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

A. Full Name (Last, First, Middle Initial) Georgians for Isakson Mailing Address 6065 Roswell Road City Atlanta State GA Zip Code 30328 Purpose of Disbursement Candidate Name Johnny Isakson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5211334 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

B. Full Name (Last, First, Middle Initial) Friends of John Thune Mailing Address 912 F Street NW #1106 City Washington State DC Zip Code 20004 Purpose of Disbursement Candidate Name Sen. John Thune Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5211337 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1500.00 Category/Type 011

C. Full Name (Last, First, Middle Initial) Berkley For Congress Mailing Address 3914 Barcroft Muse Court City Falls Church State VA Zip Code 22041 Purpose of Disbursement Candidate Name Rep. Shelley Berkley Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5224802 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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 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.	Full Name (Last, First, Middle Initial) Latham For Congress	Transaction ID: 5241592 Date of Disbursement 06 / 11 / 2009
	Mailing Address P.O. Box 71 PO Box 71	Amount of Each Disbursement this Period 2500.00
	City Clarion State IA Zip Code 50525	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Mr. Tom Latham	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of John Thune	Transaction ID: 5248010 Date of Disbursement 06 / 19 / 2009
	Mailing Address 912 F Street NW #1106	Amount of Each Disbursement this Period 1500.00
	City Washington State DC Zip Code 20004	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name Sen. John Thune	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: SD District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Freedom and Security PAC	Transaction ID: 5248011 Date of Disbursement 06 / 19 / 2009
	Mailing Address 1006 Pendleton Street	Amount of Each Disbursement this Period 1000.00
	City Alexandria State VA Zip Code 22314	
	Purpose of Disbursement	011 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)	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 13 / 13

<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.	Full Name (Last, First, Middle Initial) Eric PAC		Transaction ID: 5248013	
	Mailing Address 209 Pennsylvania Avenue, SE		Date of Disbursement 06 / 19 / 2009	
	City Washington	State DC	Zip Code 20003	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement		011	
	Candidate Name		Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

16500.00