

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 Washington DC 20005

2. FEC IDENTIFICATION NUMBER C00001198 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 04 01 2007 through 04 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 Ms. Joori Jeon

Signature of Treasurer Electronically Filed by Ms. Joori Jeon Date 09 28 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	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	4

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		277043.71
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	322532.71									
(c) Total Receipts (from Line 19) .....	5612.00	75101.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	328144.71	352144.71								
7. Total Disbursements (from Line 31) .....	22000.00	46000.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	306144.71	306144.71								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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 Hotel and Lodging Association PAC

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	4

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	3112.00	70216.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	750.00	2885.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	3862.00	73101.00
(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) .....	3862.00	73101.00
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.) .....	1750.00	2000.00
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)) .....	5612.00	75101.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	5612.00	75101.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	22000.00	46000.00
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.....	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))..	22000.00	46000.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	22000.00	46000.00

**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) .....	3862.00	73101.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3862.00	73101.00
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: (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

Full Name (Last, First, Middle Initial) <b>A.</b> Ms. Sheila H. Hartman		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 21700 Oxnard Street, Suite 1270		<b>Transaction ID:</b> 3031558	
City State Zip Code Woodland Hills CA 91367-3669		Amount of Each Receipt this Period 416.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Financial Independence Co Insurance Se		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1664.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Joe Martin		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 717 East Hall of Fame Avenue		<b>Transaction ID:</b> 3031559	
City State Zip Code Stillwater OK 74075-5449		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
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 ▼ 750.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Ms. Pam Hewlett Inman, IOM, CAE		Date of Receipt M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 7	
Mailing Address 1201 New York Ave., NW Suite 600		<b>Transaction ID:</b> 3031560	
City State Zip Code Washington DC 20005-3917		Amount of Each Receipt this Period 251.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer American Hotel & Lodging Association		Occupation Executive Vice President & COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 251.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	917.00
<b>TOTAL</b> 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 7 / 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	

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

Full Name (Last, First, Middle Initial) <b>A.</b> Mr. Douglas C. Collins		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 50 Glenlake Parkway Suite 350		<b>Transaction ID:</b> 3031563
City State Zip Code Atlanta GA 30328-7241	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer America's Best Franchising	Occupation Chairman, President, CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B.</b> Mr. Jim Davis		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 1945 The Exchange Suite 325		<b>Transaction ID:</b> 3031564
City State Zip Code Atlanta GA 30339-2062	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Servidyne Systems, LLC	Occupation Director of Business Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>C.</b> Mr. Chip Elbers		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 5 / 2 0 0 7
Mailing Address 50 Glenlake Parkway Suite 350		<b>Transaction ID:</b> 3031565
City State Zip Code Atlanta GA 30328-7241	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer America's Best Franchising, Inc.	Occupation VP/COO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	750.00
<b>TOTAL</b> 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 / 13
	<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) <b>A. Mr. George Fischer</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7	
Mailing Address 200 Inverness Drive West		<b>Transaction ID: 3031570</b>	
City State Zip Code Englewood CO 80112-5200		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C			
Name of Employer The Inverness Hotel & Conference Centre		Occupation Vice President & Managing Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. Mrs. Susan T. Smith</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 71 S. Wacker Street 12th Floor		<b>Transaction ID: 3031575</b>	
City State Zip Code Chicago IL 60606-4637		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Global Hyatt Corporation		Occupation SVP & General Counsel	
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) <b>C. Mr. Jack Rush, CHA</b>		Date of Receipt M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7	
Mailing Address 6317 State Highway 361		<b>Transaction ID: 3031576</b>	
City State Zip Code Port Aransas TX 78373-9712		Amount of Each Receipt this Period 195.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Port Royal Ocean Resort Condominiums		Occupation General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 395.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	945.00
<b>TOTAL</b> 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 9 / 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"/> 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. David Kong

Mailing Address 6201 North 24th Parkway

City State Zip Code  
Phoenix AZ 85016-2023

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

Name of Employer Occupation  
Best Western International President & CEO

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 0 7

Transaction ID: 3031578

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	3112.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 10 / 13
	(check only one)	
<input 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 checked="" type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A.</b> Asian American Hotel Owners Association PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address 228 S. Washington Street Suite 115		<b>Transaction ID:</b> 3031561
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) <b>B.</b> INN-PAC		Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 7
Mailing Address Three Ravina Drive Suite 2900		<b>Transaction ID:</b> 3031562
City Atlanta	State GA	Zip Code 30346
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1750.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1750.00

# 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 11 / 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

Full Name (Last, First, Middle Initial) <b>A. Boren for Congress</b>		Transaction ID: 3037013 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address P.O. Box 149		Amount of Each Disbursement this Period 4000.00
City Okemah State OK Zip Code 74859	Contribution: Daniel Boren (OK-2-D)	
Purpose of Disbursement Contribution: Daniel Boren (OK-2-D)		Category/Type 011
Candidate Name Daniel Boren		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 2		

Full Name (Last, First, Middle Initial) <b>B. Martinez For Senate</b>		Transaction ID: 3037010 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 610 S Boulevard		Amount of Each Disbursement this Period 1000.00
City Tampa State FL Zip Code 33606	Contribution: Mel Martinez (FL-R)	
Purpose of Disbursement Contribution: Mel Martinez (FL-R)		Category/Type 011
Candidate Name Sen. Mel Martinez		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 2		

Full Name (Last, First, Middle Initial) <b>C. Salazar For Senate</b>		Transaction ID: 3037140 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address PO Box 600		Amount of Each Disbursement this Period 1000.00
City Denver State CO Zip Code 80201	Contribution: Ken L. Salazar (CO-D)	
Purpose of Disbursement Contribution: Ken L. Salazar (CO-D)		Category/Type 011
Candidate Name Sen. Ken L. Salazar		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 2		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> 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)

PAGE 12 / 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

Full Name (Last, First, Middle Initial) <b>A. Gene Taylor For Congress Committee</b>		<b>Transaction ID: 3037014</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 7
Mailing Address Post Office Box 3838 Post Office Box 38		Amount of Each Disbursement this Period 5000.00
City Bay St Lois State MS Zip Code 39520	Contribution: Gene Taylor (MS-4-D)	
Purpose of Disbursement Contribution: Gene Taylor (MS-4-D)		011 Category/Type
Candidate Name Rep. Gene Taylor		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: MS District: 4

Full Name (Last, First, Middle Initial) <b>B. The Blue Dog PAC</b>		<b>Transaction ID: 3037009</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 1 / 2 0 0 7
Mailing Address 227 Massachusetts Avenue, NE Suite 101		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20002	Contribution: Blue Dog PAC (FL-D)	
Purpose of Disbursement Contribution: Blue Dog PAC (FL-D)		011 Category/Type
Candidate Name		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:

Full Name (Last, First, Middle Initial) <b>C. The Freedom Project</b>		<b>Transaction ID: 3037012</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 111 C Street, SE		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Contribution: The Freedom Project (OH-??-R)	
Purpose of Disbursement Contribution: The Freedom Project (OH-??)		011 Category/Type
Candidate Name		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:

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> 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)

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

Full Name (Last, First, Middle Initial)

**A.** Citizens For Turner

Mailing Address 131 N. Ludlow Street Suite 317

City State Zip Code  
Dayton OH 45402

Purpose of Disbursement  
Contribution: Michael R. Turner (OH-3-R)

Candidate Name  
Rep. Michael R. Turner

Office Sought:  House  
 Senate  
 President

State: OH District: 3

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

011  
Category/  
Type

Transaction ID: 3037011

Date of Disbursement

04 / 16 / 2007

Amount of Each Disbursement this Period

1000.00

Contribution: Michael R. Turner (OH-3-R)

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

1000.00

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

22000.00