

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
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

ADDRESS (number and street) 110 N ROYAL STREET
 Check if different than previously reported. (ACC)
ALEXANDRIA VA 22314

2. **FEC IDENTIFICATION NUMBER** C00373910
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 09 01 2008 through 09 30 2008

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 Shane Downey

Signature of Treasurer Electronically Filed by Shane Downey Date 10 16 2008

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							
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FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		73459.27
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	80971.72									
(c) Total Receipts (from Line 19)	366.92	45481.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	81338.64	118941.11								
7. Total Disbursements (from Line 31)	11594.00	49196.47								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	69744.64	69744.64								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	187.50	19556.19
(i) Itemized (use Schedule A)		
(ii) Unitemized	179.42	20925.65
(iii) TOTAL (add Lines 11(a)(i) and (ii)	366.92	40481.84
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	366.92	45481.84
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))	366.92	45481.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	366.92	45481.84

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.....	94.00	2196.47
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	94.00	2196.47
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11500.00	47000.00
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))..	11594.00	49196.47
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11594.00	49196.47

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	366.92	45481.84
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	366.92	45481.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	94.00	2196.47
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	94.00	2196.47

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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Mr. Zane Kerby	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 8657 White Beech Way	Transaction ID: 1794
	City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 20.83
	FEC ID number of contributing federal political committee. C	
Name of Employer NBTA	Occupation Sr. Director, Business & Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 369.11	

B.	Full Name (Last, First, Middle Initial) Mr. Zane Kerby	Date of Receipt MM / DD / YYYY 09 / 30 / 2008
	Mailing Address 8657 White Beech Way	Transaction ID: 1803
	City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 20.83
	FEC ID number of contributing federal political committee. C	
Name of Employer NBTA	Occupation Sr. Director, Business & Development	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.94	

C.	Full Name (Last, First, Middle Initial) Mr. Henry J. (Hank) Roeder	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 1814 Saint Roman Dr	Transaction ID: 1796
	City State Zip Code Vienna VA 22182	Amount of Each Receipt this Period 72.92
	FEC ID number of contributing federal political committee. C	
Name of Employer National Business Travel Association	Occupation Vice President, Domestic & Internation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1499.64	

SUBTOTAL of Receipts This Page (optional)	114.58
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)			
<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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)
 Mr. Henry J. (Hank) Roeder

Mailing Address 1814 Saint Roman Dr

City State Zip Code
 Vienna VA 22182

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

Name of Employer National Business Travel Association
 Occupation Vice President, Domestic & Internation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 1572.56

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: 1805

Amount of Each Receipt this Period
 72.92

SUBTOTAL of Receipts This Page (optional)	▶	72.92
TOTAL This Period (last page this line number only)	▶	187.50

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) Edonation.com	Transaction ID: 1811 Date of Disbursement
	Mailing Address 118 N. Saint Asaph Street	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="4.50"/>
	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) ▼

B.	Full Name (Last, First, Middle Initial) Edonation.com	Transaction ID: 1791 Date of Disbursement
	Mailing Address 118 N. Saint Asaph Street	<input type="text" value="09"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Credit card processing fee	<input type="text" value="9.50"/>
	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) ▼

C.	Full Name (Last, First, Middle Initial) Suntrust	Transaction ID: 1812 Date of Disbursement
	Mailing Address 110 North Royal Street	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank service charge	<input type="text" value="40.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="54.00"/>
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)

PAGE 9 / 13

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

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NAME OF COMMITTEE (In Full)

NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)

Suntrust

Mailing Address 110 North Royal Street

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
Credit card processing fee

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 1813

Date of Disbursement

09 / 30 / 2008

Amount of Each Disbursement this Period

40.00

SUBTOTAL of Disbursements This Page (optional)

40.00

TOTAL This Period (last page this line number only)

94.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

<p>A. Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08</p> <p>Mailing Address 680 TRANSFER ROAD, SUITE A</p> <p>City SAINT PAUL State MN Zip Code 55114</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name COLEMAN FOR SENATE 08</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1814 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT LORETTA SANCHEZ</p> <p>Mailing Address 1212 S Victory Bl Suite 211</p> <p>City Burbank State CA Zip Code 91502</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name COMMITTEE TO RE-ELECT LORETTA SANCHEZ</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1815 Date of Disbursement 09 / 22 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) COSTELLO FOR CONGRESS COMMITTEE</p> <p>Mailing Address P. O. BOX 8250</p> <p>City BELLEVILLE State IL Zip Code 62222</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name COSTELLO FOR CONGRESS COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 1816 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Category/ Type</p>

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)

<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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

<p>A. Full Name (Last, First, Middle Initial) FRIENDS OF JAY ROCKEFELLER</p> <p>Mailing Address PO BOX 1909</p> <p>City CHARLESTON State WV Zip Code 25327</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name FRIENDS OF JAY ROCKEFELLER Category/Type <input type="checkbox"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1817</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC</p> <p>Mailing Address 607 14TH STREET NW SUITE 800 SUITE 1434</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name FRIENDS OF MARY LANDRIEU INC Category/Type <input type="checkbox"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1818</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT</p> <p>Mailing Address PO Box 50100</p> <p>City Springfield State MO Zip Code 65805</p> <p>Purpose of Disbursement <input type="checkbox"/></p> <p>Candidate Name FRIENDS OF ROY BLUNT Category/Type <input type="checkbox"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: 1780</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>3000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.	Full Name (Last, First, Middle Initial) HEARTLAND VALUES PAC Mailing Address PO Box 505 City Sioux Falls State SD Zip Code 57101 Purpose of Disbursement <input type="text"/> Candidate Name HEARTLAND VALUES PAC Category/Type <input type="text"/> 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:	Transaction ID: 1820 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 6 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) JOHN KERRY FOR SENATE Mailing Address 10 G STREET NE SUITE 710 City WASHINGTON State DC Zip Code 20002 Purpose of Disbursement <input type="text"/> Candidate Name JOHN KERRY FOR SENATE Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 1821 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 8 Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) KPAC Mailing Address PO BOX 820365 City DALLAS State TX Zip Code 75382 Purpose of Disbursement <input type="text"/> Candidate Name KPAC Category/Type <input type="text"/> 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:	Transaction ID: 1822 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 8 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	4500.00
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)

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<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)
NATIONAL BUSINESS TRAVEL ASSOCIATION POLITICAL ACTION COMMIT

A.

Full Name (Last, First, Middle Initial)
SHEILA JACKSON LEE FOR CONGRESS

Mailing Address 4412 ALMEDA

City HOUSTON State TX Zip Code 77004

Purpose of Disbursement

Candidate Name
SHEILA JACKSON LEE FOR CONGRESS

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: 1823

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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