

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

2004 OCT 14 A 10:35

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12FB4M5

International Association of Holiday Inns

ADDRESS (number and street) Three Ravinia Drive, Ste 700

Atlanta GA 30341

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000084822

IS THIS REPORT NEW OR AMENDED

4. TYPE OF REPORT (Choose One)

(b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11) (Non-Election Year Only), Dec 20 (M12) (Non-Election Year Only), Jan 31 (YE)

(e) Quarterly Reports:

April 15 Quarterly Report (Q1), July 15 Quarterly Report (Q2), October 15 Quarterly Report (Q3), January 31 Year-End Report (YE), May 31 Mid-Year Report (Non-election Year Only) (MY), Termination Report (TER)

(c) 12-Day PRE-Election Report for this Election on: Priority (12P), General (12G), Runoff (12R), Conversion (12C), Special (12S)

(d) 30-Day POST-Election Report for this Election on: General (30G), Runoff (30R), Special (30S)

5. Covering Period 07/01/2004 through 09/30/2004

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 Eva Ferguson

Signature of Treasurer

Date 10/13/2004

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. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

International Association of Holiday Inns,

Report Covering the Period:

From:

01 01 2004

To:

01 30 2004

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date |
|---|-------------------------|-----------------------------------|
| 6. (A) Cash on Hand January 1, <u>2004</u> | | <u>167,640.71</u> |
| (B) Cash on Hand at Beginning of Reporting Period | <u>193,035.21</u> | |
| (C) Total Receipts (from Line 19) | <u>19,600.00</u> | <u>41,450.00</u> |
| (D) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a), 6(b), and 6(c) for Column B) | <u>389,035.21</u> | <u>582,140.71</u> |
| 7. Total Disbursements (from Line 31) | <u>89,348.51</u> | <u>28,245.40</u> |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | <u>299,686.70</u> | <u>299,686.71</u> |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D) | <u>0-</u> | |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | <u>0-</u> | |

This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
990 E Street, NW
Washington, DC 20463

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

International Association of Holiday Inns

Report Covering the Period:

From:

12/1/00 12/31/00

To:

12/1/00 12/31/00

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)

18,600.00

(ii) Unitemized

1,000.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)

19,600.00

(b) Political Party Committees

(c) Other Political Committees (such as PACs)

(d) Total Contributions (add Lines

11(a)(i), (b), and (c)) (Carry

Totals to Line 33, page 5)

19,600.00

41,450.00

0-

0-

41,450.00

12. Transfers From: Affiliated/Other Party Committees

0-

0-

13. All Loans Received

0-

0-

14. Loan Repayments Received

0-

0-

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)

0-

0-

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees

0-

0-

17. Other Federal Receipts (Dividends, Interest, etc.)

0-

0-

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3)

0-

0-

(b) Levin Funds (from Schedule H5)

0-

0-

(c) Total Transfers (add 18(a) and 18(b))

0-

0-

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 17, and 18(c))

19,600.00

41,450.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19)

19,600.00

41,450.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | | COLUMN A Total This Period | COLUMN B Calendar Year-to-Date |
|---|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures: | | | |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H-F) | | | |
| (i) Federal Share | | | |
| (ii) Non-Federal Share | | | |
| (b) Other Federal Operating Expenditures | | | |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) | | | |
| 22. Transfers to Affiliated/Other Party Committees | | | |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees | | 3,500.00 | 24,500.00 |
| 24. Independent Expenditures (use Schedule E) | | | |
| 25. Coordinated Party Expenditures (2 U.S.C. §412(d)) (use Schedule F) | | | |
| 26. Loan Repayments Made | | | |
| 27. Loans Made | | | |
| 28. Refunds of Contributions To: | | | |
| (a) Individuals/Persons Other Than Political Committees | | | |
| (b) Political Party Committees | | | |
| (c) Other Political Committees (such as PACs) | | | |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) | | 1,349.50 | 3,745.40 |
| 29. Other Disbursements | | | |
| 30. Federal Election Activity (2 U.S.C. §431(20)) | | | |
| (a) Allocated Federal Election Activity (from Schedule H-G) | | | |
| (i) Federal Share | | 0 | 0 |
| (ii) "Levin" Share | | 0 | 0 |
| (b) Federal Election Activity Paid Entirely With Federal Funds | | 0 | 0 |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | | 0 | 0 |
| 31. Total Disbursements (add Line 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | | 8,934.85 | 28,245.40 |
| 32. Total Federal Disbursements (subtract Line 21(a)(F) and Line 30(a)(2) from Line 31) | | 8,934.85 | 28,245.40 |

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 6

| 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) | 19,600.00 | 41,450.00 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0- | 0- |
| 35. Net Contributions (other than loans) (subtract Line 33 from Line 32) | 19,600.00 | 41,450.00 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(h)) | 0- | 0- |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0- | 0- |
| 38. Net Operating Expenditures (subtract Line 36 from Line 35) | 0- | 0- |

**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 | OF |
| <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 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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Aden, Gregory

Mailing Address
2300 Creekridge Dr

City
Mc Kinney tx State **TX** Zip Code **75070**

FEC ID number of contributing federal political committee
C

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / **20** / **2004**

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Adelman, Roy

Mailing Address
100 Hammona Drive

City
Atlanta GA State **GA** Zip Code **30328**

FEC ID number of contributing federal political committee
C

Name of Employer
Adelman Maint. Inv. Co. Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
07 / **31** / **2004**

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Alter Robert A

Mailing Address
PO Box 4240

City
San Clemente State **CA** Zip Code **92674-4240**

FEC ID number of contributing federal political committee
C

Name of Employer
Sun Stone Properties, Inc. Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4,200.00

Date of Receipt
07 / **08** / **2004**

Amount of Each Receipt this Period
1,950.00

SUBTOTAL of Receipts This Page (optional) **2,450.00**

TOTAL This Period (last page this line number only) **2,450.00**

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

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

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
ANDERSON, Richard

Mailing Address
PO Box 1104

City **St Cloud** State **MN** Zip Code **56302**

FEC ID number of contributing federal political committee
C

Name of Employer
Holiday Inn Hotel & Suites Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 19 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
ANTONIO, Douglas

Mailing Address
8975 Nesbit Lakes Dr

City **Alpharetta** State **GA** Zip Code **30022**

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 25 2005

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
AVONAK, Hugh

Mailing Address
2671 Hospitality Blvd

City **Florence** State **SC** Zip Code **29501**

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 16 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts this Page (optional) ▶ **750.00**

TOTAL This Period (last page this line number only) ▶ **750.00**

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

| | | | | | |
|---|------------------------------|-----------------------------------|-----------------------------|-----------------------------|----|
| Use separate schedules for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | | PAGE | OF |
| <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 type="checkbox"/> 17 | |

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NAME OF COMMITTEE (in Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Brandstetter, Brian

Mailing Address
819 W Lexington Pkwy

City **De Forest WI** State **WI** Zip Code **53532**

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 31 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Castro Kenneth

Mailing Address
5775 Perimeter Dr

City **Dublin GA** State **GA** Zip Code **43017**

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
08 25 2004

Amount of Each Receipt this Period
550.00

C. Full Name (Last, First, Middle Initial)
Chambliss II, Fred

Mailing Address
4022 Towanda Trail

City **Knoxville TN** State **TN** Zip Code **37919**

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 12 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **1,050.00**

TOTAL This Period (last page this line number only) **1,050.00**

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

| | | | | | |
|---|------------------------------|--------------------------------------|-----------------------------|-----------------------------|-----------------------------|
| Use separate schedule(s) for each category of the Detailed Statement Page | | FDR LINE NUMBER: (check only one) | | PAGE OF | |
| <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 type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 |

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle, Initial)
Chhabra, Shahn S.

Mailing Address:
121 Edinburgh South St 103
City: **Cary** State: **NC** Zip Code: **27511**

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

Name of Employer: **Cme Hotels** Occupation:

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: **250.00**

Date of Receipt: **09 / 31 / 2004**

Amount of Each Receipt This Period: **250.00**

B. Full Name (Last, First, Middle, Initial)
Clifton, Leonard

Mailing Address:
811 W 9th St
City: **St Louis** State: **Mo** Zip Code: **63101**

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

Name of Employer: Occupation:

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: **250.00**

Date of Receipt: **08 / 12 / 2004**

Amount of Each Receipt This Period: **250.00**

C. Full Name (Last, First, Middle, Initial)
Cream, Harold

Mailing Address:
245 W. Roosevelt Rd Ste 139
City: **West Chicago** State: **IL** Zip Code: **60185**

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

Name of Employer: **Janko Hospitality Co.** Occupation:

Receipt For:
 Primary General
 Other (specify):

Aggregate Year-to-Date: **250.00**

Date of Receipt: **08 / 25 / 2004**

Amount of Each Receipt This Period: **250.00**

SUBTOTAL of Receipts This Page (optional): **750.00**

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: (check only one) | | PAGE | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
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| | | <input type="checkbox"/> 17 | |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Curry Brian

Mailing Address 29 S. LaSalle St.

City Chicago State IL Zip Code 60603

FEC ID number of contributing federal political committee. C

Name of Employer Senator N. Logan Assoc Occupation CFO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 250.00

Date of Receipt 08 25 2004

Amount of Each Receipt this Period 250.00

B. Full Name (Last, First, Middle Initial) Doherty Edward

Mailing Address 2025 E. Eastman Ct.

City Arlington Heights State IL Zip Code 60004

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 250.00

Date of Receipt 09 15 2004

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial) Dannally Tom

Mailing Address 1615 h St. NW Ste 650

City Washington State DC Zip Code 20036

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date 250.00

Date of Receipt 08 30 2004

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only) 750.00

750.00

750.00

**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 | OF |
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| | | | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Dyson, Bzo

Mailing Address
PO Box 1929

City State Zip Code
Cherokee NC 28719

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 / 29 / 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Field, Patrick

Mailing Address
4215 Concession #2

City State Zip Code
Loretto Ontario

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 08 / 2004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Fishman, Jay

Mailing Address
24 S. La Salle St.

City State Zip Code
Chicago IL 60603

FEC ID number of contributing federal political committee
C

Name of Employer Occupation
Seymour N Logan & Assoc

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 / 04 / 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

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

250.00

**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 | OF |
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NAME OF COMMITTEE (in Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Goldfine, Steven

Mailing Address
525 N Lake Ave

City
Duluth MN State Zip Code
55802

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 04 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Gray, Jerald

Mailing Address
600 Northland Dr. Ste A

City
Valparaiso IN State Zip Code
46385

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 01 2004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Govind, Darshan

Mailing Address
149 Crestview Dr

City
San Carlos CA State Zip Code
94070

FEC ID number of contributing federal political committee
C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 03 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this item number only)

**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 | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 12 | <input type="checkbox"/> 13 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 17 |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. **Hagerter, Jr., James**

Mailing Address

1965 Flager Circle

City

Manassas

State

VA

Zip Code

20104

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 01 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. **Hart, William**

Mailing Address

617 Dingers St.

City

Buffalo

State

NY

Zip Code

14206

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 01 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. **Hilton Jr., Charles L.**

Mailing Address

1127 Front Beach Rd

City

Panama City Beach, FL

State

Zip Code

32407

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

07 / 15 / 2004

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional) ▶

1,250.00

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

1,250.00

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

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

| | | | | |
|------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: | | PAGE | | OF |
| (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 type="checkbox"/> 17 |

Any information copied from such Reports and Statements may not be 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)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Hargen Michael

Mailing Address
209 Haley House Lane

City
Apex NC State Zip Code
27502

FEC ID number of contributing federal political committee
0

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 16 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Hutchison John T

Mailing Address
1 Denver Road

City
Denver PA State Zip Code
17517

FEC ID number of contributing federal political committee
0

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 20 2004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Taken Paul

Mailing Address
51 Guyencourt Rd.

City
Montchanin DE State Zip Code
19807

FEC ID number of contributing federal political committee
0

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
09 16 2004

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ▶ **1,000.00**

TOTAL This Period (first page this form number only) ▶

**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 OF |
| <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 type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

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

Mailing Address
150 Nicolet Rd

City **Appleton** State **WI** Zip Code **54914**

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

Name of Employer
Hi Select Appleton Occupation **GM**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 01 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Kinsell Kirk

Mailing Address
3669 Canyon Ridge Ct NE

City **Atlanta** State **GA** Zip Code **30319**

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

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
07 12 2004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Koopman WI Benjamin

Mailing Address
office Park Circle Ste 101

City **Birmingham** State **AL** Zip Code **35223**

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

Name of Employer
Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
08 25 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **750.00**

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: (check only one) | PAGE OF |
| <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 type="checkbox"/> 17 |

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Krivoshen Jeff

Residing Address
18 2nd Ave E 21st

City **Saskatoon** State **Sask** Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 02 2004

Amount of Each Receipt this Period
250.00

B. Full Name (Last, First, Middle Initial)
Lair E. Leno

Residing Address
2258 Hwy 70 SE

City **Hickory** State **NC** Zip Code **28602**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
09 01 2004

Amount of Each Receipt this Period
250.00

C. Full Name (Last, First, Middle Initial)
Laurie Stewart

Residing Address
2167 Alconbury Crescent

City **Burlington** State **ON** Zip Code **L7P3C5**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
09 20 2004

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) **750.00**

TOTAL This Period (last page this form number only)

**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 | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 10 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | |

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NAME OF COMMITTEE (in full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Levy, Donald

Mailing Address 535 Park Ave

City Glencoe State IL Zip Code 60022

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 250.00

Date of Receipt 09 / 26 / 2004

Amount of Each Receipt This Period 250.00

B. Full Name (Last, First, Middle Initial) Miles, Elliott

Mailing Address 1724 Marie Dr.

City Hopkinsville State KY Zip Code 42240

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 700.00

Date of Receipt 07 / 29 / 2004

Amount of Each Receipt This Period 600.00

C. Full Name (Last, First, Middle Initial) Morgan, Dean

Mailing Address 1010 Northland Dr.

City Volparaigo State TX Zip Code 46385

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 250.00

Date of Receipt 08 / 12 / 2004

Amount of Each Receipt This Period 250.00

SUBTOTAL of Receipts This Page (optional) 1,100.00

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: (check only one) | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Mueller, Craig

Mailing Address

4323 Camelot Circle

City

Naperville

State

IL

Zip Code

60564

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 01 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Murray, William

Mailing Address

Three Ravenna Dr Ste 100

City

Atlanta

State

GA

Zip Code

30246

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Meyer, William D

Mailing Address

1601 Belvedere Rd Ste 401

City

West Palm Beach

State

FL

Zip Code

33406

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 14 / 2004

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

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 (check only one) | | PAGE | | OF |
|-------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| <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 type="checkbox"/> 17 |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Narashy, Michael

Mailing Address

2300 Corporate Blvd NW

City

Boca Raton

State

FL

Zip Code

33431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 16 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Patel, Vijay

Mailing Address

1133 Pebblewood Way

City

San Mateo

State

CA

Zip Code

94403

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 20 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Potts, Dennis

Mailing Address

4150 Baymeadows Rd

City

Jacksonville

State

FL

Zip Code

32256

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 20 2004

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

750.00

TOTAL This Period (last page this one number only)

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

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

| | | | | |
|--------------------------------------|------------------------------|------------------------------|-----------------------------|-----------------------------|
| FOR LINE NUMBER: (check only one) | | PAGE | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <input type="checkbox"/> 18 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 | <input type="checkbox"/> |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

Roth, Sam

Mailing Address

4400 Frontage Rd

City

Hillside

State

IL

Zip Code

60162

FEC ID number of contributing federal political committee

C

Name of Employer

Holiday Inn Hillside

Occupation

Receipt For

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 03 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Russell Fred

Mailing Address

445 Southside Rd

City

Virginia Beach

State

VA

Zip Code

23451

FEC ID number of contributing federal political committee

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 23 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Schahet Gary

Mailing Address

9333 N Meridian St.

City

Indianapolis

State

IN

Zip Code

46260

FEC ID number of contributing federal political committee

C

Name of Employer

Schahet Hotels, INC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 23 / 2004

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional)

1,000.00

TOTAL This Period (last page this line number only)

1,000.00

**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 | OF |
| <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 type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

Schick Roland

A.

Mailing Address

Three Ravinia Dr.

City

Atlanta

GA

State

30344

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

SIMPSON Sk.

B.

Mailing Address

Three Ravinia Dr Ste 100

City

Atlanta

GA

State

30344

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 20 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Smith, Roy

C.

Mailing Address

1401 Halstead Cir

City

Dayton

OH

State

45458

Zip Code

FEC ID number of contributing federal political committee.

C

Name of Employer

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

200.00

Date of Receipt

09 / 01 / 2004

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional) →

700.00

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

700.00

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

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. Squires, Glen

Mailing Address

117 Kearney Lake Ra

City

Halifax

State

NS

Zip Code

B3M4N9

FEC ID number of contributing federal political committee.

C

Name of Employer

Pacrim Hospitality Serv. Inc.

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 03 / 2004

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Sen, Frank

Mailing Address

77 W. Buckley Ra

City

Libertyville

State

IL

Zip Code

60048

FEC ID number of contributing federal political committee.

C

Name of Employer

Gurnee Sun R.Est. LLC

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

09 / 03 / 2004

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. Taber, Mark

Mailing Address

1100 Union Ave

City

Memphis

State

TN

Zip Code

38103

FEC ID number of contributing federal political committee.

C

Name of Employer

Holiday Inn Select Int

Occupation

GM

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

09 / 03 / 2004

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)

1250.00

TOTAL This Period (last page use 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: (check only one) | | PAGE | OF |
| <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 type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) Takash, Peter J.

Mailing Address 101 SE Columbia Shores

City Vancouver State WA Zip Code 98661

FEC ID number of contributing federal political committee: C

Name of Employer NW Hospitality Group LLC Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 550.00

Date of Receipt 08 / 30 / 2004

Amount of Each Receipt this Period 550.00

B. Full Name (Last, First, Middle Initial) Wallace, David M.

Mailing Address 4754 South Davy Crockett Pkwy

City Morristown State TN Zip Code 37813

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 250.00

Date of Receipt 09 / 15 / 2004

Amount of Each Receipt this Period 250.00

C. Full Name (Last, First, Middle Initial) Wallace, Robert Victor

Mailing Address 301 N Main

City Salisbury State NC Zip Code 28144

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 250.00

Date of Receipt 08 / 25 / 2004

Amount of Each Receipt this Period 250.00

SUBTOTAL of Receipts This Page (optional) 750.00

TOTAL This Period (last page this line number only) 750.00

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

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

| FOR LINE NUMBER: | | PAGE | OF |
|-------------------------------|--------------------------------|-----------------------------|-----------------------------|
| <input type="checkbox"/> 1-15 | <input type="checkbox"/> 16-18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 |
| <input type="checkbox"/> 15 | <input type="checkbox"/> 14 | <input type="checkbox"/> 15 | <input type="checkbox"/> 16 |
| <input type="checkbox"/> 17 | <input type="checkbox"/> 18 | <input type="checkbox"/> 19 | <input type="checkbox"/> 20 |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) David

Mailing Address 22 E. High St.

City Oxford State OH Zip Code 45056

FEC ID number of contributing federal political committee: C

Name of Employer Noted Development Svcs. Inc. Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 2500.00

Date of Receipt 09 13 2004

Amount of Each Receipt this Period 2500.00

B. Full Name (Last, First, Middle Initial) Gina Gary

Mailing Address 1111 Plaza Drive Ste 200

City Schaumburg State IL Zip Code 60173

FEC ID number of contributing federal political committee: C

Name of Employer Hostmark Hospitality Group Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 2500.00

Date of Receipt 09 21 2004

Amount of Each Receipt this Period 2500.00

C. Full Name (Last, First, Middle Initial) Zett Mark

Mailing Address 1801 W. Naperville Blvd

City Naperville State IL Zip Code 60563

FEC ID number of contributing federal political committee: C

Name of Employer _____ Occupation _____

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date 500.00

Date of Receipt 09 12 2004

Amount of Each Receipt this Period 500.00

SUBTOTAL of Receipts This Page (optional) _____

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

12000.00

**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 | | OF |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b | <input type="checkbox"/> 11c | <input type="checkbox"/> 12 | <input type="checkbox"/> 17 |
| <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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial)
Zimmerman, Marie

Mailing Address
8776 Kinlock Cove

City **German town** State **TX** Zip Code **38139**

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
550.00

Date of Receipt
04 / 02 / 2004

Amount of Each Receipt this Period
300.00

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

Mailing Address

City State Zip Code

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C. Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer: _____ Occupation: _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional) **300.00**

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 OF

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

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) **Beauprez, Bob**

Mailing Address **3994 Youngfield St.**

City **Wheat Ridge Co.** State **CO** Zip Code **80633**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Beauprez for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **CO** District: **07**

Date of Disbursement: **09 / 15 / 2004**

Amount of Each Disbursement this Period: **1500.00**

B. Full Name (Last, First, Middle Initial) **Chandler for Congress**

Mailing Address **PO Box 12678**

City **Lexington** State **KY** Zip Code **40583**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Chandler for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **KY** District: **06**

Date of Disbursement: **09 / 15 / 2004**

Amount of Each Disbursement this Period: **500.00**

C. Full Name (Last, First, Middle Initial) **Dent, Charlie**

Mailing Address **PO Box 442**

City **Allentown** State **PA** Zip Code **18103-0442**

Purpose of Disbursement **Contribution** Category/Type **011**

Candidate Name **Charlie Dent for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **PA** District: **15**

Date of Disbursement: **09 / 15 / 2004**

Amount of Each Disbursement this Period: **500.00**

SUBTOTAL of Disbursements This Page (optional) **1500.00**

TOTAL This Period (last page this line number only)

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

Use separate schedules for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE OF

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

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NAME OF COMMITTEE (in Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) **DeMint, Jim**

Mailing Address **30 Patwood Dr Ste 160**

City **Greenville** State **SC** Zip Code **29615**

Purpose of Disbursement **Contribution**

Candidate Name **DeMint for Senate** Category/Type **011**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **SC** District:

Date of Disbursement: **03/15/2004**

Amount of Each Disbursement this Period: **1,000.00**

B. Full Name (Last, First, Middle Initial) **Davis, Geoff**

Mailing Address **PO Box 7192**

City **Fort Mitchell** State **Ky** Zip Code **41017**

Purpose of Disbursement **contribution**

Candidate Name **Geoff Davis 2004** Category/Type **011**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: **04/15/2007**

Amount of Each Disbursement this Period: **500.00**

C. Full Name (Last, First, Middle Initial) **Isakson, Johnny**

Mailing Address **PO Box 71955**

City **Marietta** State **GA** Zip Code **30007**

Purpose of Disbursement **Contribution**

Candidate Name **Isakson for Isakson** Category/Type **011**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **GA** District:

Date of Disbursement: **08/15/2004**

Amount of Each Disbursement this Period: **1,000.00**

SUBTOTAL of Disbursements This Page (optional): **2,500.00**

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 01

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|------------------------------|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <input type="checkbox"/> 21a | <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"/> 23a | <input type="checkbox"/> 23b | <input type="checkbox"/> 23c | <input type="checkbox"/> 22 | <input type="checkbox"/> 30b |

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NAME OF COMMITTEE (in Full)

International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

Thune, John

Date of Disbursement

09 / 15 / 2004

Mailing Address

PO Box 2501

City

Siox Falls

State

ND

Zip Code

58101

Purpose of Disbursement

Contribution

011

Amount of Each Disbursement this Period

1,000.00

Candidate Name

John Thune for US Senate

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

ND

District:

Full Name (Last, First, Middle Initial)

Oxley Mike

Date of Disbursement

09 / 15 / 2004

Mailing Address

PO Box 1998

City

Findlay

State

OH

Zip Code

45127

Purpose of Disbursement

Contribution

011

Amount of Each Disbursement this Period

500.00

Candidate Name

Oxley for Congress

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

OH

District:

04

Full Name (Last, First, Middle Initial)

Sessions, Pete

Date of Disbursement

09 / 15 / 2004

Mailing Address

PO Box 38575

City

Dallas

State

TX

Zip Code

75238

Purpose of Disbursement

Contribution

011

Amount of Each Disbursement this Period

500.00

Candidate Name

Pete Sessions for Congress

Category/Type

Office Sought:

House
 Senate
 President

Disbursement For:

Primary General
 Other (specify) ▼

State:

TX

District:

32

SUBTOTAL of Disbursements This Page (optional)

2,500.00

TOTAL This Period (last page this line number only)

2,500.00

**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 | OF |
| <input type="checkbox"/> | 21a | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> | 24 |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 28a | <input type="checkbox"/> | 28b | <input type="checkbox"/> | 28c |
| <input type="checkbox"/> | | <input type="checkbox"/> | 29 | <input type="checkbox"/> | 30 | <input type="checkbox"/> | 30a |

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NAME OF COMMITTEE (in Full)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial) **Peterson Collin**

Mailing Address **PO Box 265**

City **Detroit Lakes** State **MN** Zip Code **55824**

Purpose of Disbursement **Contribution** **Q11** Category/Type

Candidate Name **Peterson for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **MN** District: **07**

Date of Disbursement: **06** / **15** / **2004**

Amount of Each Disbursement this Period: **500.00**

B. Full Name (Last, First, Middle Initial) **Shelby Richard**

Mailing Address **PO Box 1091**

City **Tuscaloosa** State **AL** Zip Code **35401**

Purpose of Disbursement **Contribution** **Q11** Category/Type

Candidate Name **Shelby for Senate**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **AL** District:

Date of Disbursement: **06** / **15** / **2004**

Amount of Each Disbursement this Period: **100.00**

C. Full Name (Last, First, Middle Initial) **Stenholm Charlie**

Mailing Address **4412 50th St Ste B**

City **Lubbock** State **TX** Zip Code **79414**

Purpose of Disbursement **Contribution** **Q11** Category/Type

Candidate Name **Stenholm for Congress**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: **TX** District: **19**

Date of Disbursement: **09** / **15** / **2004**

Amount of Each Disbursement this Period: **500.00**

SUBTOTAL of Disbursements This Page (optional) **2000.00**

TOTAL This Period (last page this line number only) **2000.00**

**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 | OF |
| <input type="checkbox"/> | 21b | <input type="checkbox"/> | 22 | <input type="checkbox"/> | 23 | <input type="checkbox"/> |
| <input type="checkbox"/> | 27 | <input type="checkbox"/> | 22a | <input type="checkbox"/> | 22b | <input type="checkbox"/> |
| | | <input type="checkbox"/> | 24 | <input type="checkbox"/> | 25 | <input type="checkbox"/> |
| | | | 22c | <input type="checkbox"/> | 29 | <input type="checkbox"/> |
| | | | | | | 30b |

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NAME OF COMMITTEE (in Full)
International Association of Holiday Inns

Full Name (Last, First, Middle Initial)

A. **Boehner, John**

Date of Disbursement

Mailing Address

| | | |
|----|----|------|
| MM | DD | YYYY |
| 11 | 08 | 2008 |

111 C Street SE

City **Washington DC** State Zip Code

Purpose of Disbursement

| |
|---------------|
| Category/Type |
| 011 |

Amount of Each Disbursement this Period

Candidate Name **The Freedom Project**

| |
|--------|
| Amount |
| 500.00 |

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

Date of Disbursement

Mailing Address

| | | |
|----|----|------|
| MM | DD | YYYY |
| | | |

City State Zip Code

Purpose of Disbursement

| |
|---------------|
| Category/Type |
| |

Amount of Each Disbursement this Period

Candidate Name

| |
|--------|
| Amount |
| |

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C. Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

| | | |
|----|----|------|
| MM | DD | YYYY |
| | | |

City State Zip Code

Purpose of Disbursement

| |
|---------------|
| Category/Type |
| |

Amount of Each Disbursement this Period

Candidate Name

| |
|--------|
| Amount |
| |

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|--------|
| Amount |
| 500.00 |

TOTAL This Period (last page this line number only)

| |
|---------|
| Amount |
| 2500.00 |

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

| | | | | | | | | | | | |
|---|-----|--------------------------------------|-----|--------------------------|-----|--------------------------|-----|--------------------------|----|--------------------------|-----|
| 1 Use separate schedule(s) for each category of the Detailed Summary Page | | FOR LINE NUMBER: (check only one) | | | | | | PAGE | OF | | |
| <input type="checkbox"/> | 21a | <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)
International Association of Holiday Inns

A. Full Name (Last, First, Middle Initial): **Fidelity Bank**

Mailing Address: _____

City: **Atlanta** State: **GA** Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Service Charge**

State: **District**

Date of Disbursement: **NOV 31 2004**

Amount of Each Disbursement this Period: **5.00**

Category/Type: **001**

B. Full Name (Last, First, Middle Initial): **Fidelity Bank**

Mailing Address: _____

City: **Atlanta** State: **GA** Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Small Charge**

State: **District**

Date of Disbursement: **NOV 31 2004**

Amount of Each Disbursement this Period: **3.00**

Category/Type: **001**

C. Full Name (Last, First, Middle Initial): **Fidelity Bank**

Mailing Address: _____

City: **Atlanta** State: **GA** Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Service Charge**

State: **District**

Date of Disbursement: **NOV 31 2004**

Amount of Each Disbursement this Period: **16.00**

Category/Type: **001**

SUBTOTAL of Disbursements This Page (optional): **24.00**

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

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NAME OF COMMITTEE (In Full)
International Association of Holiday Inns

A.

Full Name (Last, First, Middle Initial)
Arturo C. ...

Mailing Address
320 ...

City
Atlanta State
GA Zip Code
30308

Purpose of Disbursement
CCC

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Recruitment Fee**

State: **District:**

Date of Disbursement
05 / **10** / **2004**

Amount of Each Disbursement this Period
375.00

B.

Full Name (Last, First, Middle Initial)
Mr. Bee Systems

Mailing Address
500 Main St.

City
Greenville State
NC Zip Code
01471-0004

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Office**

State: **District:**

Date of Disbursement
08 / **19** / **2004**

Amount of Each Disbursement this Period
3385

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: **District:**

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **408.85**

TOTAL This Period (last page this line number only) **434.85**

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

| | |
|--|---|
| <input type="checkbox"/> Hand Delivered | Date of Receipt |
| <input type="checkbox"/> USPS First Class Mail | Postmarked |
| <input type="checkbox"/> USPS Registered/Certified | Postmarked (R/C) |
| <input type="checkbox"/> USPS Priority Mail | Postmarked |
| | Delivery Confirmation™ Label <input type="checkbox"/> |
| <input type="checkbox"/> USPS Express Mail | Postmarked |
| <input type="checkbox"/> Postmark Illegible | |
| <input type="checkbox"/> No Postmark | |
| <input checked="" type="checkbox"/> Overnight Delivery Service (Specify): <i>Fedex</i> | Shipping Date <i>10-13-04</i> |
| <input type="checkbox"/> Received from House Records & Registration Office | Date of Receipt |
| <input type="checkbox"/> Received from Senate Public Records Office | Date of Receipt |
| <input type="checkbox"/> Received from Electronic Filing Office | Date of Receipt |
| <input type="checkbox"/> Other (Specify): | Date of Receipt or Postmarked |

JE1
 PREPARER

(5/2004)

10-14-04
 DATE PREPARED