

# 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  
International Association of Holiday Inns INN-PAC

ADDRESS (number and street) Three Ravinia Drive Suite 100  
 Check if different than previously reported. (ACC)  
Atlanta GA 30346

2. **FEC IDENTIFICATION NUMBER** C00084822  
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 (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of GA

5. Covering Period 10 01 2010 through 11 22 2010

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 Eva Ferguson

Signature of Treasurer Electronically Filed by Ms Eva Ferguson Date 04 04 2011

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
International Association of Holiday Inns INN-PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		35225.71
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	51936.09									
(c) Total Receipts (from Line 19) .....	6580.00	62827.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	58516.09	98052.71								
7. Total Disbursements (from Line 31) .....	17000.00	56536.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	41516.09	41516.09								
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

Write or Type Committee Name

International Association of Holiday Inns INN-PAC

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	6415.00	60489.00
(ii) Unitemized .....	165.00	2338.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	6580.00	62827.00
(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) .....	6580.00	62827.00
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.) .....	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)) .....	6580.00	62827.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	6580.00	62827.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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	2000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17000.00	54500.00
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	36.62
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))..	17000.00	56536.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17000.00	56536.62

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	6580.00	62827.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6580.00	62827.00
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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Mike Cohen

Mailing Address 824 Pembroke Road

City State Zip Code  
Libertyville IL 60048

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
The Bricton Group, Inc Hotel Executive

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 20 / 2010

**Transaction ID:** SA11AI.6122

Amount of Each Receipt this Period 250.00

donation

**B.** Full Name (Last, First, Middle Initial)  
Bryan Curry

Mailing Address 29 South LsSalle St

City State Zip Code  
Chicago IL 60302

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Associated Hotels LLC Hotel Investor & Owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 13 / 2010

**Transaction ID:** SA11AI.6106

Amount of Each Receipt this Period 250.00

donation

**C.** Full Name (Last, First, Middle Initial)  
Danny Ehrat

Mailing Address 9475 Highway 49

City State Zip Code  
Gulfport MS 39503

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
Shular Companies Hotel Owner & Investor

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt M M / D D / Y Y Y Y  
10 / 08 / 2010

**Transaction ID:** SA11AI.6138

Amount of Each Receipt this Period 250.00

donation

**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: PAGE 7 / 20  
(check only one)

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

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

<p><b>A.</b> Full Name (Last, First, Middle Initial) Rick Engel</p> <p>Mailing Address 340 Lakewood Drive</p> <p>City State Zip Code Gadsen AL 35901</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Summit Investments Group Hotel Investor &amp; Owner</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 27 / 2010</p> <p><b>Transaction ID:</b> SA11AI.6123</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p> <p>donation</p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Seth Fellman</p> <p>Mailing Address 5414 N.W. 72nd Avenue</p> <p>City State Zip Code Miami FL 33166</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Morlin Hospitality Group Real Estate / Hotel Developer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">250.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 04 / 2010</p> <p><b>Transaction ID:</b> SA11AI.6110</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p> <p>donation</p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Robert Francis</p> <p>Mailing Address Three Ravinia Drive</p> <p>City State Zip Code Atlanta GA 30345</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Digital Financial Group EVP Sales &amp; Marketing</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">265.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 10 / 07 / 2010</p> <p><b>Transaction ID:</b> SA11AI.6136</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">265.00</span></p> <p>donation</p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1015.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# 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 8 / 20
	<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)  
International Association of Holiday Inns INN-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Michael Horgan	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 209 Haley House Lane	<b>Transaction ID:</b> SA11AI.6116
	City State Zip Code Apex NC 27502	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	donation
	Name of Employer: InterContinental Hotels Group Occupation: VP of Franchise Sales Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Stuart Lauri	Date of Receipt MM / DD / YYYY 10 / 04 / 2010
	Mailing Address 2167 Allonbury Cres	<b>Transaction ID:</b> SA11AI.6109
	City State Zip Code Burlington VT 00000	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	donation
	Name of Employer: Intercontinental Hotels Group Occupation: Director of Franchise Sales & Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Serge Lussi,	Date of Receipt MM / DD / YYYY 10 / 15 / 2010
	Mailing Address 1 Olympic Drive	<b>Transaction ID:</b> SA11AI.6115
	City State Zip Code Lake Placid NY 12946	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	donation
	Name of Employer: Crowne Plaza Lake Placid Occupation: Hotel Owner Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 800.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>600.00</b>
<b>TOTAL</b> 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 9 / 20
	<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)  
International Association of Holiday Inns INN-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Serge Lussi		Date of Receipt
	Mailing Address 1 Olympic Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 19 / 2010
	City	State	Zip Code
	Lake Placid	NY	12946
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.6118
Name of Employer Crowne Plaza Lake Pacid		Occupation Hotel Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00	<input type="text"/> 50.00
			donation

<b>B.</b>	Full Name (Last, First, Middle Initial) Cristina Lussi		Date of Receipt
	Mailing Address 241 Victor Herbert Road		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 15 / 2010
	City	State	Zip Code
	Lake Placid	NY	12946
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.6114
Name of Employer Lake Placid Vacation Corp.		Occupation VP	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 50.00
			donation

<b>C.</b>	Full Name (Last, First, Middle Initial) William Murrah		Date of Receipt
	Mailing Address Three Ravinia Drive		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 10 / 05 / 2010
	City	State	Zip Code
	Atlanta	GA	30346
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.6111
Name of Employer Intercontinental Hotels Group		Occupation Regional Director of Franchise Sales	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 300.00
			donation

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 400.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 10 / 20
	<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)  
International Association of Holiday Inns INN-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) Ghanshyam Patel		Date of Receipt
	Mailing Address 340 Lakewood Drive		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Gasden	AL	35901
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6107
Name of Employer Fort Payne Lodgings		Occupation Hotel Investor	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="250.00"/>
			donation

<b>B.</b>	Full Name (Last, First, Middle Initial) Fred and Patricia Russell		Date of Receipt
	Mailing Address 3600 Pacific Avenue		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Virginia Beach	VA	23451
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6112
Name of Employer InterContinental Hotels Group		Occupation Director of Brand Management	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
			donation

<b>C.</b>	Full Name (Last, First, Middle Initial) David and Andrea Shamoian		Date of Receipt
	Mailing Address 319 Speen St		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Natick	MA	01760
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.6117
Name of Employer Peabody Hotel Group		Occupation Hotel Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="50.00"/>
			donation

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="350.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 11 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Happy Sikand  
Mailing Address 2449 Nalin Drive  
City Los Angeles State CA Zip Code 90077  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Happy Hotels Occupation Business Hotel Owner  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 550.00  
Date of Receipt 10 / 20 / 2010  
Transaction ID: SA11AI.6120  
Amount of Each Receipt this Period 300.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
S.K. and Sharon Simpson  
Mailing Address 4960 Rose Creek Drive  
City Cumming State GA Zip Code 30040  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Intercontinental Hotels Group Occupation Director of Franchise Development  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.00  
Date of Receipt 10 / 27 / 2010  
Transaction ID: SA11AI.6125  
Amount of Each Receipt this Period 300.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
Paul T Snyder  
Mailing Address 315 Vickers Drive NE  
City Atlanta State GA Zip Code 30307  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Intercontinental Hotels Group Occupation VP of Operations - Portfolio  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1200.00  
Date of Receipt 10 / 20 / 2010  
Transaction ID: SA11AI.6121  
Amount of Each Receipt this Period 900.00  
donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 12 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Wayne Tabor

Mailing Address 118 Morningside Drive

City Marion State AR Zip Code 72364

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

Name of Employer: Holiday Inn Downtown Memphis  
Occupation: General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 07 / 2010  
Transaction ID: SA11AI.6134  
Amount of Each Receipt this Period: 300.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
James V Thomas

Mailing Address 105 Buttermere Ct

City Johns Creek State GA Zip Code 30022

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

Name of Employer: Intercontinental Hotels Group  
Occupation: Director - Airline & Leisure Sales/Srv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 10 / 13 / 2010  
Transaction ID: SA11AI.6140  
Amount of Each Receipt this Period: 250.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
James V Thomas

Mailing Address 105 Buttermere Ct

City Johns Creek State GA Zip Code 30022

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

Name of Employer: Intercontinental Hotels Group  
Occupation: Director - Airline & Leisure Sales/Srv

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 15 / 2010  
Transaction ID: SA11AI.6144  
Amount of Each Receipt this Period: 250.00  
donation

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 20  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
Benjamin Von Bruenchenhein

Mailing Address 55 S. Vail Ave. Apt. #1503

City State Zip Code  
Arlington Heights IL 60005

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

Name of Employer Occupation  
Holiday Inn Skokie IL Hotel Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 10 / 09 / 2010  
Transaction ID: SA11AI.6132  
Amount of Each Receipt this Period: 300.00  
donation

**B.** Full Name (Last, First, Middle Initial)  
James Weadbrock

Mailing Address 1480 Jefferson Davis Hwy

City State Zip Code  
Arlington VA 22202

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

Name of Employer Occupation  
Crowne Plaza Wash Nat'l Airpor General Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt: 10 / 19 / 2010  
Transaction ID: SA11AI.6119  
Amount of Each Receipt this Period: 600.00  
donation

**C.** Full Name (Last, First, Middle Initial)  
Adrian Wewers

Mailing Address 3106 Pignatelli Crescent

City State Zip Code  
Mt. Pleasant SC 29466

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

Name of Employer Occupation  
Premier Hospitality Group, Inc Partner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 10 / 27 / 2010  
Transaction ID: SA11AI.6127  
Amount of Each Receipt this Period: 50.00  
donation

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 950.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: <span style="float: right;">PAGE 14 / 20</span>	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) Gary Williams		Date of Receipt
	Mailing Address 1601 Angelwing Dr		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Silver Spring	MD	20904
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
	Name of Employer Coakley & Williams Hotel Mgmt		Occupation President & CEO
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1050.00"/>	
			Transaction ID: SA11AI.6113
			Amount of Each Receipt this Period <input type="text" value="50.00"/>
			donation

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="50.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="6415.00"/>

**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)  
International Association of Holiday Inns INN-PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) <b>BENISHEK FOR CONGRESS</b></p> <p>Mailing Address 802 Pentoga Trail</p> <p>City Crystal Falls State MI Zip Code 49920</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name <b>BENISHEK FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6094</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) <b>BILLY LONG FOR CONGRESS</b></p> <p>Mailing Address 1675-F E SEMINOLE</p> <p>City SPRINGFIELD State MO Zip Code 65804</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name <b>BILLY LONG FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6104</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) <b>DOHENY FOR CONGRESS</b></p> <p>Mailing Address 107 Court Street PO Box 257</p> <p>City Watertown State NY Zip Code 13601</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name <b>DOHENY FOR CONGRESS</b></p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6099</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 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)  
International Association of Holiday Inns INN-PAC

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF ROY BLUNT</p> <p>Mailing Address Attn: Keri Ann Hayes 209 Pennsylvania Ave. SE</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name FRIENDS OF ROY BLUNT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 07</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6083</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Georgians for Isakson</p> <p>Mailing Address POST OFFICE BOX 250116</p> <p>City ATLANTA State GA Zip Code 30325</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name Georgians for Isakson</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6079</p> <p>Date of Disbursement 10 / 04 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE</p> <p>Mailing Address P.O. Box A</p> <p>City Harrisonville State MO Zip Code 64701</p> <p>Purpose of Disbursement donation</p> <p>Candidate Name IKE SKELTON FOR CONGRESS COMMITTEE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.6103</p> <p>Date of Disbursement 10 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>012 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)  
International Association of Holiday Inns INN-PAC

**A.** Full Name (Last, First, Middle Initial)  
**JAIME HERRERA FOR CONGRESS**

Mailing Address PO Box 1614

City Ridgefield State WA Zip Code 98642

Purpose of Disbursement donation

Candidate Name  
**JAIME HERRERA FOR CONGRESS**

Office Sought:  House  
 Senate  
 President  
State: WA District: 03

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.6080  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B.** Full Name (Last, First, Middle Initial)  
**JOE MILLER FOR US SENATE**

Mailing Address PO BOX 72838

City FAIRBANKS State AK Zip Code 99707

Purpose of Disbursement donation

Candidate Name  
**JOE MILLER FOR US SENATE**

Office Sought:  House  
 Senate  
 President  
State: AK District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.6077  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
**RONALD HAROLD JOHNSON**

Mailing Address 601 OREGON STREET SUITE B

City OSHKOSH State WI Zip Code 54902

Purpose of Disbursement donation

Candidate Name  
**RONALD HAROLD JOHNSON**

Office Sought:  House  
 Senate  
 President  
State: WI District: 00

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB23.6085  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

**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)  
International Association of Holiday Inns INN-PAC

**A.** Full Name (Last, First, Middle Initial)  
**MIKE MCINTYRE FOR CONGRESS**

Mailing Address P.O. Box 1

City Lumberton State NC Zip Code 28359

Purpose of Disbursement donation

012  
Category/  
Type

Candidate Name  
**MIKE MCINTYRE FOR CONGRESS**

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: NC District: 07

Transaction ID: SB23.6082  
Date of Disbursement

10 / 19 / 2010

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
**MIKE ROSS FOR CONGRESS COMMITTEE**

Mailing Address PO Box 360

City Prescott State AR Zip Code 71857

Purpose of Disbursement donation

012  
Category/  
Type

Candidate Name  
**MIKE ROSS FOR CONGRESS COMMITTEE**

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: AR District: 04

Transaction ID: SB23.6076  
Date of Disbursement

10 / 04 / 2010

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
**MOBROOKSFORCONGRESS.COM**

Mailing Address 7610 FOXFIRE DRIVE

City HUNTSVILLE State AL Zip Code 35802

Purpose of Disbursement donation

012  
Category/  
Type

Candidate Name  
**MOBROOKSFORCONGRESS.COM**

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼

State: AL District: 05

Transaction ID: SB23.6092  
Date of Disbursement

10 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

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

4000.00

**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)

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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)  
International Association of Holiday Inns INN-PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>NUNNELEE FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6096 Date of Disbursement 10 / 19 / 2010	
	Mailing Address 438 EAST MAIN ST PO BOX 7092		
	City TUPELO State MS Zip Code 38802	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement donation Candidate Name NUNNELEE FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>PAT MEEHAN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6088 Date of Disbursement 10 / 19 / 2010	
	Mailing Address 50 S. Providence Road		
	City Media State PA Zip Code 19063	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement donation Candidate Name PAT MEEHAN FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>STEVE FINCHER FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.6090 Date of Disbursement 10 / 19 / 2010	
	Mailing Address PO BOX 11153		
	City JACKSON State TN Zip Code 38308	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement donation Candidate Name STEVE FINCHER FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	012 Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 20 / 20

<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)  
International Association of Holiday Inns INN-PAC

A.

Full Name (Last, First, Middle Initial)  
TOM REED FOR CONGRESS

Mailing Address 99 W 1st Street

City State Zip Code  
Corning NY 14830

Purpose of Disbursement  
donation

Candidate Name  
TOM REED FOR CONGRESS

Office Sought:  House  
 Senate  
 President  
State: NY District: 29

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6101

Date of Disbursement

10 / 19 / 2010

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

17000.00