

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)

ADDRESS (number and street)

228 S. Washington Street

Suite 115

Check if different than previously reported. (ACC)

Alexandria

VA

22314

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00336743

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

(c) 12-Day PRE-Election Report for the:

- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on

/  /

in the State of

(d) 30-Day POST-Election Report for the:

- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on

/  /

in the State of

5. Covering Period

/  /  07 / 01 / 2011

through

/  /  12 / 31 / 2011

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 Alkesh Patel

Signature of Treasurer

*Alkesh Patel*

[Electronically Filed]

Date

/  /  01 / 24 / 2012

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		<input type="text" value="272522.20"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="273318.83"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="26604.90"/>	<input type="text" value="37161.49"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="299923.73"/>	<input type="text" value="309683.69"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="35914.62"/>	<input type="text" value="45674.58"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="264009.11"/>	<input type="text" value="264009.11"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Report Covering the Period: From:  /  /  To:  /  /

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).....	21767.00	27188.00
(ii) Unitemized .....	4470.00	9157.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	26237.00	36345.00
(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) .....	26237.00	36345.00
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.).....	367.90	816.49
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 Transfers (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))..... ▶	26604.90	37161.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26604.90	37161.49

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	1452.62	2212.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	1452.62	2212.58
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	28500.00	37500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	5962.00	5962.00
(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)).....	5962.00	5962.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	35914.62	45674.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35914.62	45674.58

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	26237.00	36345.00
34. Total Contribution Refunds (from Line 28(d)) .....	5962.00	5962.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	20275.00	30383.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	1452.62	2212.58
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1452.62	2212.58

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 31
	<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	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Prakesh Bhakta</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2011
Mailing Address 1117 NE 13th Street			<b>Transaction ID : SA11AI.7176</b>
City Oklahoma City	State OK	Zip Code 73117	Amount of Each Receipt this Period 365.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Hotel owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00		

Full Name (Last, First, Middle Initial) <b>B. Prakesh Bhakta</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011
Mailing Address 1117 NE 13th Street			<b>Transaction ID : SA11AI.7227</b>
City Oklahoma City	State OK	Zip Code 73117	Amount of Each Receipt this Period 365.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Hotel owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00		

Full Name (Last, First, Middle Initial) <b>C. Kanan Desai</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 22 / 2011
Mailing Address 5828 Memorial Road			<b>Transaction ID : SA11AI.7125</b>
City Allentown	State PA	Zip Code 18104	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer Self-employed	Occupation Hotel owner		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	980.00
<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 7 OF 31
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Subhash Gandhi</b>		Date of Receipt
Mailing Address 1120 S. 10th Street		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City Clinton	State OK	Zip Code 73601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.7186</b>
Name of Employer Self-employed		Amount of Each Receipt this Period
Occupation Hotel owner		<input type="text" value="250.00"/>
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"/>

Full Name (Last, First, Middle Initial) <b>B. Subhash Gandhi</b>		Date of Receipt
Mailing Address 1120 S. 10th Street		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City Clinton	State OK	Zip Code 73601
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.7226</b>
Name of Employer Self-employed		Amount of Each Receipt this Period
Occupation Hotel owner		<input type="text" value="250.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="500.00"/>

Full Name (Last, First, Middle Initial) <b>C. Himesh M. Jeram</b>		Date of Receipt
Mailing Address 1001 N. Shebwooley Drive		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City Erick	State OK	Zip Code 73645
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.7182</b>
Name of Employer Self-employed		Amount of Each Receipt this Period
Occupation Hotel owner		<input type="text" value="365.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼
		<input type="text" value="365.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="865.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)  
**A. Himesh M. Jeram**

Mailing Address 1001 N. Shebwooley Drive

City Erick	State OK	Zip Code 73645
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Hotel owner
-----------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **730.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	01	/	2011

**Transaction ID : SA11AI.7225**

Amount of Each Receipt this Period  

365.00
--------

Full Name (Last, First, Middle Initial)  
**B. Mukesh J. Mowji**

Mailing Address 6514 McAbee Road

City San Jose	State CA	Zip Code 95120
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FEC ID number of contributing federal political committee. **C**

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

**Transaction ID : SA11AI.7135**

Amount of Each Receipt this Period  

365.00
--------

Full Name (Last, First, Middle Initial)  
**C. Rashmi Natha**

Mailing Address 2308 S. Meridian

City Oklahoma City	State OK	Zip Code 73108
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FEC ID number of contributing federal political committee. **C**

Name of Employer Self-employed	Occupation Hotel owner
-----------------------------------	---------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	17	/	2011

**Transaction ID : SA11AI.7174**

Amount of Each Receipt this Period  

365.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1095.00</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 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Rashmi Natha</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011
Mailing Address 2308 S. Meridian		<b>Transaction ID : SA11AI.7221</b>
City Oklahoma City	State OK	Zip Code 73108
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 750.00	
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1115.00	

Full Name (Last, First, Middle Initial) <b>B. A.H. Patel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2011
Mailing Address 7475 E. Admiral Place		<b>Transaction ID : SA11AI.7156</b>
City Tulsa	State OK	Zip Code 74115
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 365.00	
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) <b>C. Arvind M. Patel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 08 / 2011
Mailing Address 25569 S. Gold Ridge Drive		<b>Transaction ID : SA11AI.7141</b>
City Castro Valley	State CA	Zip Code 94552
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 365.00	
Name of Employer Holiday Inn Express	Occupation Hotelier	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1480.00
<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 10 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

**A. Bharat V. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 2223 Pistachio Road

City Irving State TX Zip Code 75063

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

Name of Employer Self-employed Occupation Hotel owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1001.00

Date of Receipt 08 / 08 / 2011  
**Transaction ID : SA11AI.7164**

Amount of Each Receipt this Period 1001.00

**B. Champak B. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 3022 NW Expressway

City Oklahoma City State OK Zip Code 73112

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

Name of Employer Self-employed Occupation Hotel owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 10 / 17 / 2011  
**Transaction ID : SA11AI.7184**

Amount of Each Receipt this Period 2000.00

**c. Champak B. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 3022 NW Expressway

City Oklahoma City State OK Zip Code 73112

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

Name of Employer Self-employed Occupation Hotel owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 4000.00

Date of Receipt 11 / 01 / 2011  
**Transaction ID : SA11AI.7222**

Amount of Each Receipt this Period 2000.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 5001.00

**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 11 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

**A. Dhirendra S. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 4620 Enterprise Way

City Oklahoma City      State OK      Zip Code 73128

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

Name of Employer Self-employed      Occupation Hotel owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
501.00

Date of Receipt  
10 / 17 / 2011  
**Transaction ID : SA11AI.7185**

Amount of Each Receipt this Period  
501.00

**B. Dhirendra S. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 4620 Enterprise Way

City Oklahoma City      State OK      Zip Code 73128

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

Name of Employer Self-employed      Occupation Hotel owner

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1002.00

Date of Receipt  
11 / 01 / 2011  
**Transaction ID : SA11AI.7229**

Amount of Each Receipt this Period  
501.00

**C. Dilipkumar R. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 104 Royal Crest Circle

City Kathleen      State GA      Zip Code 31047

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

Name of Employer Peach State Hospitality      Occupation Developer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
365.00

Date of Receipt  
08 / 08 / 2011  
**Transaction ID : SA11AI.7136**

Amount of Each Receipt this Period  
365.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1367.00

**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 12 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Dipak V. Patel</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2011
Mailing Address 1217 N. Horner Boulevard		<b>Transaction ID : SA11AI.7130</b>
City Sanford	State NC	Zip Code 27550
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 500.00
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Jay S. Patel</b>		Date of Receipt MM / DD / YYYY 08 / 08 / 2011
Mailing Address 6919 Pensacola Boulevard		<b>Transaction ID : SA11AI.7127</b>
City Pensacola	State FL	Zip Code 32505
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 365.00
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) <b>C. Kirit Patel</b>		Date of Receipt MM / DD / YYYY 11 / 01 / 2011
Mailing Address 864 N. King Street		<b>Transaction ID : SA11AI.7248</b>
City Northampton	State MA	Zip Code 01060-3883
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 365.00
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1230.00
<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 13 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

**A. Kirit R. Patel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 17007 Abercorn Street  
 City Savannah State GA Zip Code 31419  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Hotel owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 08 / 08 / 2011  
**Transaction ID : SA11AI.7172**  
 Amount of Each Receipt this Period  
**365.00**

**B. Mayur Patel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 122 Express Boulevard  
 City Leesville State LA Zip Code 71446  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Hotel owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 08 / 08 / 2011  
**Transaction ID : SA11AI.7138**  
 Amount of Each Receipt this Period  
**365.00**

**C. Naresh Patel**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6919 Pensacola Boulevard  
 City Pensacola State FL Zip Code 32505  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Self-employed Occupation Hotel owner  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **365.00**

Date of Receipt  
 08 / 08 / 2011  
**Transaction ID : SA11AI.7129**  
 Amount of Each Receipt this Period  
**365.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>1095.00</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 14 OF 31
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Naresh Patel</b>		Date of Receipt
Mailing Address 6112 NW 63rd Street		<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2011"/>
City	State	Zip Code
Oklahoma City	OK	73132
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.7177
Self-employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1001.00"/>	<input type="text" value="1001.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Naresh Patel</b>		Date of Receipt
Mailing Address 6112 NW 63rd Street		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City	State	Zip Code
Oklahoma City	OK	73132
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.7224
Self-employed	Physician	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="2002.00"/>	<input type="text" value="1001.00"/>
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Paresh R. Patel</b>		Date of Receipt
Mailing Address 9502 S. 73rd E. Avenue		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
City	State	Zip Code
Tulsa	OK	74133
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.7154
Promise Hotels	Hotel management	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="365.00"/>	<input type="text" value="365.00"/>
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2367.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 15 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Pinakin J. Patel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 11 / 2011
Mailing Address 3402 N. Highway 81		<b>Transaction ID : SA11AI.7180</b>
City Duncan	State OK	Zip Code 73533
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 365.00	
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) <b>B. Pinakin J. Patel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 01 / 2011
Mailing Address 3402 N. Highway 81		<b>Transaction ID : SA11AI.7228</b>
City Duncan	State OK	Zip Code 73533
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 365.00	
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 730.00	

Full Name (Last, First, Middle Initial) <b>C. Pramod K. Patel</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 17 / 2011
Mailing Address 2401 Navona Place		<b>Transaction ID : SA11AI.7179</b>
City Oklahoma City	State OK	Zip Code 73170
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 750.00	
Name of Employer Self-employed	Occupation Hotel owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 750.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1480.00
<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 16 OF 31
<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Pramod K. Patel</b>		Date of Receipt
Mailing Address 2401 Navona Place		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City	State	Zip Code
Oklahoma City	OK	73170
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.7220</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="750.00"/>
Name of Employer	Occupation	
Self-employed	Hotel owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1500.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Preyas Patel</b>		Date of Receipt
Mailing Address 138 N. Main Street		<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2011"/>
City	State	Zip Code
Rutland	VT	05701
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.7247</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="365.00"/>
Name of Employer	Occupation	
Self-employed	Hotel owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="365.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Rajesh Patel</b>		Date of Receipt
Mailing Address 3051 Louisiana Highway 1 South		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
City	State	Zip Code
Port Allen	LA	70767
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.7150</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="501.00"/>
Name of Employer	Occupation	
UNR Hospitality, LLC	Hotel manager	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="501.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1616.00"/>
<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 17 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

**A. Raju C. Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 191 El Bonito Way

City	State	Zip Code
Millbrae	CA	94030

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

Name of Employer	Occupation
Self-employed	Hotel owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

**Transaction ID : SA11AI.7132**

Amount of Each Receipt this Period  

365.00
--------

**B. Rameshbhai Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 13004 Doriath Way

City	State	Zip Code
Oklahoma City	OK	73170

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

Name of Employer	Occupation
Best Western Broadway Inn	Hotel owner

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	07	/	2011

**Transaction ID : SA11AI.7242**

Amount of Each Receipt this Period  

500.00
--------

**C. Shailesh Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 2222 W. Skelly Drive

City	State	Zip Code
Tulsa	OK	74107

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

Name of Employer	Occupation
Self-employed	Hotelier

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **365.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	08	/	2011

**Transaction ID : SA11AI.7143**

Amount of Each Receipt this Period  

365.00
--------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>1230.00</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 18 OF 31
	<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

**A. Sumanbhai Patel**  
Full Name (Last, First, Middle Initial)

Mailing Address 2709 SW 125 Terrace

City Oklahoma City State OK Zip Code 73170

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

Name of Employer Self-employed Occupation Hotel owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 501.00

Date of Receipt  
12 / 07 / 2011  
**Transaction ID : SA11AI.7244**

Amount of Each Receipt this Period  
501.00

**B. Kirit Patidar**  
Full Name (Last, First, Middle Initial)

Mailing Address 2389 Mayport Road

City Atlantic Beach State FL Zip Code 32333

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

Name of Employer Self-employed Occupation Hotel owner

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
08 / 08 / 2011  
**Transaction ID : SA11AI.7148**

Amount of Each Receipt this Period  
365.00

**C. Gary A. Prema**  
Full Name (Last, First, Middle Initial)

Mailing Address 1111-B Bell Road

City Antioch State TN Zip Code 37013

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

Name of Employer Occupation Knights Inn Manager

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 365.00

Date of Receipt  
08 / 08 / 2011  
**Transaction ID : SA11AI.7133**

Amount of Each Receipt this Period  
365.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1231.00
<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 19 OF 31
<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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. Satya Shaw</b>		Date of Receipt
Mailing Address 14502 N. Dale Mabry		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
City	State	Zip Code
Tampa	FL	33618
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.7158</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="365.00"/>
Name of Employer	Occupation	
Self-employed	Hotel owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="365.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Sanmukh M. Swami</b>		Date of Receipt
Mailing Address 8859 Paseo de Valencia Street		<input type="text" value="08"/> / <input type="text" value="08"/> / <input type="text" value="2011"/>
City	State	Zip Code
Fort Myers	FL	33908
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.7142</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="365.00"/>
Name of Employer	Occupation	
Jay Group, LLC	Partner/Hotel owner	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="365.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text" value="C"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="730.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="21767.00"/>

**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 20 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA17.7110</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="77.08"/>
Receipt For:	Aggregate Year-to-Date ▼	interest income
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="525.67"/>	

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA17.7112</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="77.10"/>
Receipt For:	Aggregate Year-to-Date ▼	interest income
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="602.77"/>	

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA17.7121</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
		<input type="text" value="69.35"/>
Receipt For:	Aggregate Year-to-Date ▼	interest income
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="672.12"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="223.53"/>
<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 21 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial) <b>A. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="10"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.7213</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="55.06"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		interest income
Aggregate Year-to-Date ▼		
<input type="text" value="727.18"/>		

Full Name (Last, First, Middle Initial) <b>B. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="11"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.7251</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="46.67"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		interest income
Aggregate Year-to-Date ▼		
<input type="text" value="773.85"/>		

Full Name (Last, First, Middle Initial) <b>C. BB&amp;T Bank</b>		Date of Receipt
Mailing Address 1909 K Street NW		<input type="text" value="12"/> / <input type="text" value="31"/> / <input type="text" value="2011"/>
City	State	Zip Code
Washington	DC	20006
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.7256</b>
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="42.64"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		interest earned
Aggregate Year-to-Date ▼		
<input type="text" value="816.49"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="144.37"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="367.90"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
07 / 15 / 2011

**Transaction ID : SB21B.7109**

Amount of Each Disbursement this Period

52.14

Full Name (Last, First, Middle Initial)

**B. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 15 / 2011

**Transaction ID : SB21B.7111**

Amount of Each Disbursement this Period

52.72

Full Name (Last, First, Middle Initial)

**C. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 21 / 2011

**Transaction ID : SB21B.7113**

Amount of Each Disbursement this Period

53.16

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

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

158.02

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2011

**Transaction ID : SB21B.7188**

Amount of Each Disbursement this Period

52.57

Full Name (Last, First, Middle Initial)

**B. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 14 / 2011

**Transaction ID : SB21B.7214**

Amount of Each Disbursement this Period

36.90

Full Name (Last, First, Middle Initial)

**C. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2011

**Transaction ID : SB21B.7252**

Amount of Each Disbursement this Period

53.99

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

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

143.46

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. BB&T Bank**

Mailing Address 1909 K Street NW

City Washington State DC Zip Code 20006

Purpose of Disbursement  
service charge

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 31 / 2011

Transaction ID : SB21B.7257

Amount of Each Disbursement this Period

53.69

Full Name (Last, First, Middle Initial)

**B. PayPal**

Mailing Address P.O. Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 08 / 2011

Transaction ID : SB21B.7122

Amount of Each Disbursement this Period

289.31

Full Name (Last, First, Middle Initial)

**C. PayPal**

Mailing Address P.O. Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 22 / 2011

Transaction ID : SB21B.7123

Amount of Each Disbursement this Period

8.75

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

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

351.75



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. PayPal**

Mailing Address P.O. Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
credit card processing fees

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
10 / 17 / 2011

**Transaction ID : SB21B.7187**

Amount of Each Disbursement this Period

212.13

**B. PayPal**

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 45950

City Omaha State NE Zip Code 68145

Purpose of Disbursement  
credit card processing fee

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
11 / 30 / 2011

**Transaction ID : SB21B.7253**

Amount of Each Disbursement this Period

587.26

**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

799.39

1452.62

**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)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. CANTOR FOR CONGRESS**

Mailing Address P.O. BOX 17813

City RICHMOND State VA Zip Code 23226

Purpose of Disbursement contribution

Candidate Name

**ERIC CANTOR**

Office Sought:  House  Senate  President  
State: VA District: 07

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 21 / 2011

Transaction ID : **SB23.7208**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF BILL POSEY**

Mailing Address P. O. BOX 360877

City MELBOURNE State FL Zip Code 32936

Purpose of Disbursement contribution

Candidate Name

**BILL POSEY**

Office Sought:  House  Senate  President  
State: FL District: 15

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
10 / 26 / 2011

Transaction ID : **SB23.7211**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. JAIME HERRERA FOR CONGRESS**

Mailing Address PO BOX 1614

City RIDGEFIELD State WA Zip Code 98642

Purpose of Disbursement contribution

Candidate Name

**JAIME LYNN HERRERA**

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

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
11 / 25 / 2011

Transaction ID : **SB23.7218**

Amount of Each Disbursement this Period

2500.00

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

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

8000.00

**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)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. NATIONAL REPUBLICAN CONGRESSIONAL COMMITTEE**

Mailing Address 320 FIRST STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
10 / 27 / 2011

Transaction ID : SB23.7212

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**B. RAJA FOR CONGRESS**

Mailing Address PO BOX 958033

City HOFFMAN ESTATES State IL Zip Code 60195

Purpose of Disbursement contribution

Candidate Name

**S RAJA KRISHNAMOORTHY**

Office Sought:  House  Senate  President  
State: IL District: 08

Disbursement For: 2012  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2011

Transaction ID : SB23.7117

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. RO FOR CONGRESS INC**

Mailing Address 42648 BARON STREET

City FREMONT State CA Zip Code 94539

Purpose of Disbursement contribution

Candidate Name

**ROHIT KHANNA**

Office Sought:  House  Senate  President  
State: CA District: 12

Disbursement For: 2012  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
11 / 25 / 2011

Transaction ID : SB23.7217

Amount of Each Disbursement this Period

3000.00

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

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

15500.00

**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)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. TEXANS FOR TOM LEPPERT**

Mailing Address 1845 WOODALL RODGERS FWY STE 1225

City DALLAS State TX Zip Code 75201

Purpose of Disbursement  
contribution

Candidate Name  
**THOMAS C LEPPERT**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: TX District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2011

**Transaction ID : SB23.7120**

Amount of Each Disbursement this Period

5000.00

**B.**

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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

**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

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

5000.00

28500.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)  
**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. Prakesh Bhakta**

Mailing Address 1117 NE 13th Street

City Oklahoma City State OK Zip Code 73117

Purpose of Disbursement contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2011

Transaction ID : SB28A.7236

Amount of Each Disbursement this Period

365.00

Full Name (Last, First, Middle Initial)

**B. Subhash Gandhi**

Mailing Address 1120 S. 10th Street

City Clinton State OK Zip Code 73601

Purpose of Disbursement contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2011

Transaction ID : SB28A.7235

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. Himesh M. Jeram**

Mailing Address 1001 N. Shebwooley Drive

City Erick State OK Zip Code 73645

Purpose of Disbursement contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2011

Transaction ID : SB28A.7234

Amount of Each Disbursement this Period

365.00

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

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

980.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. Rashmi Natha**

Mailing Address 2308 S. Meridian

City Oklahoma City State OK Zip Code 73108

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 14 / 2011

**Transaction ID : SB28A.7230**

Amount of Each Disbursement this Period

365.00

Full Name (Last, First, Middle Initial)

**B. Champak B. Patel**

Mailing Address 3022 NW Expressway

City Oklahoma City State OK Zip Code 73112

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2011

**Transaction ID : SB28A.7231**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. Dharendra S. Patel**

Mailing Address 4620 Enterprise Way

City Oklahoma City State OK Zip Code 73128

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
12 / 07 / 2011

**Transaction ID : SB28A.7238**

Amount of Each Disbursement this Period

501.00

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

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

2866.00

**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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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)

**ASIAN AMERICAN HOTEL OWNERS ASSOCIATION PAC (AAHOA PAC)**

Full Name (Last, First, Middle Initial)

**A. Naresh Patel**

Mailing Address 6112 NW 63rd Street

City Oklahoma City State OK Zip Code 73132

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2011

**Transaction ID : SB28A.7233**

Amount of Each Disbursement this Period

1001.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**B. Pinakin J. Patel**

Mailing Address 3402 N. Highway 81

City Duncan State OK Zip Code 73533

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 07 / 2011

**Transaction ID : SB28A.7237**

Amount of Each Disbursement this Period

365.00

Category/  
Type

Full Name (Last, First, Middle Initial)

**C. Pramod K. Patel**

Mailing Address 2401 Navona Place

City Oklahoma City State OK Zip Code 73170

Purpose of Disbursement  
contribution refund

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
12 / 02 / 2011

**Transaction ID : SB28A.7219**

Amount of Each Disbursement this Period

750.00

Category/  
Type

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

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

2116.00

5962.00