

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-Q)

ADDRESS (number and street) 1201 15th Street NW
Suite 400
 Check if different than previously reported. (ACC)
Washington DC 20005

2. **FEC IDENTIFICATION NUMBER** C00358663
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12G)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 03 31 2009 in the State of NY

5. Covering Period 01 01 2009 through 04 20 2009

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 Sandra Yartin DePoy

Signature of Treasurer Electronically Filed by Sandra Yartin DePoy Date 05 11 2010

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)

A. Form/Schedule : **F3XA**

Transaction ID :

Operating expenditures listed in the report were incurred on behalf of ARDA-ROC PAC. If a contribution was made to, or expenditure made on behalf of, another committee, that would be noted in the report.

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

Report Covering the Period: From:

M M	D D	Y Y Y Y
0 1	0 1	2 0 0 9

 To:

M M	D D	Y Y Y Y
0 4	2 0	2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 0 9</td></tr></table>	Y Y Y Y	2 0 0 9		2252634.23
Y Y Y Y				
2 0 0 9				
(b) Cash on Hand at Beginning of Reporting Period	2252634.23			
(c) Total Receipts (from Line 19)	1177920.79	1177920.79		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3430555.02	3430555.02		
7. Total Disbursements (from Line 31)	715379.07	715379.07		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2715175.95	2715175.95		
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00			
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00			

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

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)	0.00	0.00
(ii) Unitemized	1164917.07	1164917.07
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1164917.07	1164917.07
(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)	1164917.07	1164917.07
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.)	13003.72	13003.72
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))	1177920.79	1177920.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	1177920.79	1177920.79

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	438704.07	438704.07
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	438704.07	438704.07
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	188425.00	188425.00
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.....	88250.00	88250.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	715379.07	715379.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	715379.07	715379.07

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)	1164917.07	1164917.07
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1164917.07	1164917.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	438704.07	438704.07
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	438704.07	438704.07

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 62
(check only one)

11a 11b 11c 12
 13 14 15 16 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial)
Comerica Securities

Mailing Address 201 W. Fort Street

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1539.14

Date of Receipt
MM / DD / YYYY
01 / 31 / 2009

Transaction ID: 92164bec7c21d925ce8

Amount of Each Receipt this Period
391.68

Interest

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

Mailing Address 201 W. Fort Street

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1539.14

Date of Receipt
MM / DD / YYYY
02 / 28 / 2009

Transaction ID: 5d2b9e9ad0d7e81dbb0

Amount of Each Receipt this Period
603.90

Interest

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

Mailing Address 201 W. Fort Street

City State Zip Code
Detroit MI 48226

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1539.14

Date of Receipt
MM / DD / YYYY
03 / 31 / 2009

Transaction ID: 0f204258ff3710992b8

Amount of Each Receipt this Period
543.56

Interest

SUBTOTAL of Receipts This Page (optional) ► **1539.14**

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 8 / 62
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial)
Smith Barney

Mailing Address 1850 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 11464.58

Date of Receipt 01 / 31 / 2009

Transaction ID: b6be333883e4a6a7bb4

Amount of Each Receipt this Period 0.05

Interest

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

Mailing Address 1850 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 11464.58

Date of Receipt 01 / 31 / 2009

Transaction ID: 6138a900577c1bf619a

Amount of Each Receipt this Period 4299.10

Interest

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

Mailing Address 1850 K Street, NW

City Washington State DC Zip Code 20006

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 11464.58

Date of Receipt 02 / 28 / 2009

Transaction ID: 930d4aad46b0f2df83b

Amount of Each Receipt this Period 0.04

Interest

SUBTOTAL of Receipts This Page (optional) ► 4299.19

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 9 / 62
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 1850 K Street, NW		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee. C		Transaction ID: cd718f6a0403df09fb
Name of Employer		Occupation	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="1475.20"/>
		<input type="text" value="11464.58"/>	Interest

B.	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 1850 K Street, NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee. C		Transaction ID: 7ff80aa92fc659343ee
Name of Employer		Occupation	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="0.03"/>
		<input type="text" value="11464.58"/>	Interest

C.	Full Name (Last, First, Middle Initial) Smith Barney		Date of Receipt
	Mailing Address 1850 K Street, NW		<input type="text" value="03"/> / <input type="text" value="31"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	Washington	DC	20006
	FEC ID number of contributing federal political committee. C		Transaction ID: 77f75962576cec85ac8
Name of Employer		Occupation	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="5690.16"/>
		<input type="text" value="11464.58"/>	Interest

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="7165.39"/>
TOTAL This Period (last page this line number only)	<input type="text" value="13003.72"/>

**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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) American Resort Development Association</p> <p>Mailing Address 1201 15th Street NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Rent, Salary, Utilities, Security, Copying</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V40693a0aa5d7856f62b</p> <p>Date of Disbursement 01 / 08 / 2009</p> <p>Amount of Each Disbursement this Period 12500.00</p> <p>001 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) American Resort Development Association</p> <p>Mailing Address 1201 15th Street NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Rent, Salary, Utilities, Security, Copying, Annual Subscription Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vcc146c27d234fe8b06b</p> <p>Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 14440.69</p> <p>001 Category/ Type</p> <p>See Attribution Below</p>
<p>C. Full Name (Last, First, Middle Initial) Bureau of National Affairs Inc.</p> <p>Mailing Address PO Box 17009</p> <p>City Baltimore State MD Zip Code 21297-1009</p> <p>Purpose of Disbursement Tax Report Subscription</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V0e65234009be79706eb</p> <p>Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 938.80</p> <p>001 Category/ Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	26940.69
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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) Columbia Books</p> <p>Mailing Address 8120 Woodmont Ave. Suite 110</p> <p>City Bethesda State MD Zip Code 20814</p> <p>Purpose of Disbursement Publication Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vad99e4cb79d1c9068f5 Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 264.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Roll Call</p> <p>Mailing Address 50 F Street. NW Suite 700</p> <p>City Washington State DC Zip Code 20001</p> <p>Purpose of Disbursement Subscription Renewal Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vc8e2c22772763845730 Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 512.89</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) The Hill</p> <p>Mailing Address 1625 K Street NW Suite 900</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Subscription Renewal Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vdcddb4bd490d80cf963 Date of Disbursement 02 / 04 / 2009</p> <p>Amount of Each Disbursement this Period 225.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <hr/> <p>Mailing Address 1201 15th Street NW Suite 400</p> <hr/> <p>City Washington State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement POL Tax Payment</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vdde8a77b3cd83694dc9</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">29135.15</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	0	9	29135.15
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	1		2	0	0	9													
29135.15																						
<p>B.</p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <hr/> <p>Mailing Address 1201 15th Street NW Suite 400</p> <hr/> <p>City Washington State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement Rent, Salary, Utilities, Security, Copying</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V5e25db49fe03e750a63</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">12500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	1		2	0	0	9	12500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		0	1		2	0	0	9													
12500.00																						
<p>C.</p> <p>Full Name (Last, First, Middle Initial) American Resort Development Association</p> <hr/> <p>Mailing Address 1201 15th Street NW Suite 400</p> <hr/> <p>City Washington State DC Zip Code 20005</p> <hr/> <p>Purpose of Disbursement Rent, Salary, Utilities, Security, Copying</p> <p>Candidate Name</p> <hr/> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <hr/> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V613806ed8af939dc513</p> <p>Date of Disbursement</p> <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> <p>Amount of Each Disbursement this Period</p> <table border="1"> <tr> <td style="text-align: center;">12500.00</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	1		2	0	0	9	12500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	4		0	1		2	0	0	9													
12500.00																						

SUBTOTAL of Disbursements This Page (optional)	54135.15
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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) ARDA-ROC <hr/> Mailing Address 1201 15th Street, NW Suite 400 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Quarterly State Consulting and Lobbying Retainer & Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V48ef962a3caf9cb975d Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 145122.37
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Aventum <hr/> Mailing Address 1155 21st Street, NW Suite 330 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V0743cf90f9981f0e87a Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3500.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Aventum <hr/> Mailing Address 1155 21st Street, NW Suite 330 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vb8526d386845a8750a7 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 7000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

155622.37

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Aventum</p> <p>Mailing Address 1155 21st Street, NW Suite 330</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Voided 12/3/08 Check</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V24019-5482904314994</p> <p>Date of Disbursement 01 / 31 / 2009</p> <p>Amount of Each Disbursement this Period -3500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Aventum</p> <p>Mailing Address 1155 21st Street, NW Suite 330</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vb9363c9c9500df5b62c</p> <p>Date of Disbursement 03 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 3500.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Aventum</p> <p>Mailing Address 1155 21st Street, NW Suite 330</p> <p>City Washington State DC Zip Code 20006</p> <p>Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vd74ab4900f1c1c23f89</p> <p>Date of Disbursement 04 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 2850.00</p>

SUBTOTAL of Disbursements This Page (optional)	2850.00
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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Baker & Hostetler	Transaction ID: V1f1968cf0e5827f69e0 Date of Disbursement
	Mailing Address Connecticut Avenue, NW Suite 1100	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Retainer and Expenses for Legal Services Candidate Name	<input type="text" value="4198.05"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Baker & Hostetler	Transaction ID: V213cdeee09935ee6628 Date of Disbursement
	Mailing Address Connecticut Avenue, NW Suite 1100	<input type="text" value="02"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Retainer and Expenses for Legal Services Candidate Name	<input type="text" value="4372.66"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Baker & Hostetler	Transaction ID: Vc635dbf344d03154f5d Date of Disbursement
	Mailing Address Connecticut Avenue, NW Suite 1100	<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City Washington State DC Zip Code 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement Retainer and Expenses for Legal Services Candidate Name	<input type="text" value="11451.89"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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)

PAGE 16 / 62

<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Baker & Hostetler <hr/> Mailing Address Connecticut Avenue, NW Suite 1100 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Retainer and Expenses for Legal Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V8e753d368e9cf5219fc Date of Disbursement 04 / 14 / 2009	Amount of Each Disbursement this Period 4580.03
B.	Full Name (Last, First, Middle Initial) Bockorny Group, Inc. <hr/> Mailing Address L Street, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Retainer and Expenses for Legislative Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V577a39a2ba5ec81c23c Date of Disbursement 01 / 13 / 2009	Amount of Each Disbursement this Period 9895.44
C.	Full Name (Last, First, Middle Initial) Bockorny Group, Inc. <hr/> Mailing Address L Street, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Retainer and Expenses for Legislative Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V13d1fc6347e0760bdc3 Date of Disbursement 02 / 17 / 2009	Amount of Each Disbursement this Period 9822.77

SUBTOTAL of Disbursements This Page (optional) ▶	24298.24
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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Bockorny Group, Inc. Mailing Address L Street, NW City Washington State DC Zip Code 20005 Purpose of Disbursement Retainer and Expenses for Legislative Services Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Va34139ef2a8b1a8f7ed Date of Disbursement 03 / 19 / 2009 Amount of Each Disbursement this Period 9903.24 001 Category/Type
B.	Full Name (Last, First, Middle Initial) Bureau of National Affairs Inc. Mailing Address PO Box 17009 City Baltimore State MD Zip Code 21297-1009 Purpose of Disbursement Tax Report Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V2b3d76dd94e3568b9f3 Date of Disbursement 02 / 17 / 2009 Amount of Each Disbursement this Period 938.78 001 Category/Type
C.	Full Name (Last, First, Middle Initial) Bureau of National Affairs Inc. Mailing Address PO Box 17009 City Baltimore State MD Zip Code 21297-1009 Purpose of Disbursement Tax Report Subscription Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V5f2396706d2c8779673 Date of Disbursement 03 / 19 / 2009 Amount of Each Disbursement this Period 985.07 001 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

11827.09

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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Dad's Catering Service <hr/> Mailing Address 8522 N. 7th Street <hr/> City Phoenix State AZ Zip Code 85020 <hr/> Purpose of Disbursement Catering Services Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vf24a99f9643ee093cf3 Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 1945.02
B.	Full Name (Last, First, Middle Initial) D.C. Arena <hr/> Mailing Address 601 F Street, NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Verizon Center Box Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Va53769cc564df08134d Date of Disbursement 03 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 20000.00
C.	Full Name (Last, First, Middle Initial) D.C. Arena <hr/> Mailing Address 601 F Street, NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Verizon Center Box Rental Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vbe4dfe8f9e8ad8983b9 Date of Disbursement 04 / 01 / 2009 <hr/> Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

26945.02

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Democracy Data & Communications	Transaction ID: V2ac12055258bdbde65d Date of Disbursement
	Mailing Address 44 Canal Center Plaza Suite 200	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly Database Maintenance and Fees	<input type="text" value="3812.50"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Democracy Data & Communications	Transaction ID: Vfd363ea18e6586f027f Date of Disbursement
	Mailing Address 44 Canal Center Plaza Suite 200	<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly Database Maintenance and Fees	<input type="text" value="3000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Democracy Data & Communications	Transaction ID: Ve0022455590fe6a6e6d Date of Disbursement
	Mailing Address 44 Canal Center Plaza Suite 200	<input type="text" value="03"/> / <input type="text" value="01"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Monthly Database Maintenance and Fees	<input type="text" value="3000.00"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9812.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Democracy Data & Communications	Transaction ID: Vbbec0599864e04e8007
	Mailing Address 44 Canal Center Plaza Suite 200	Date of Disbursement MM / DD / YYYY 03 / 19 / 2009
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 5406.25
	Purpose of Disbursement Monthly Database Maintenance and Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Democracy Data & Communications	Transaction ID: V319cbb77992e52ca140
	Mailing Address 44 Canal Center Plaza Suite 200	Date of Disbursement MM / DD / YYYY 04 / 01 / 2009
	City Alexandria State VA Zip Code 22314	Amount of Each Disbursement this Period 3162.50
	Purpose of Disbursement Monthly Database Maintenance and Fees	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) DePoy Sandra	Transaction ID: V922f59b6e7a3ea92de0
	Mailing Address 1201 15th Street, NW Suite 400	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 5880.81
	Purpose of Disbursement Reimbursement of Expenses	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

See Attribution Below

SUBTOTAL of Disbursements This Page (optional) ▶

14449.56

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: Vdd5c4ffe1fe612646fe
	Mailing Address Union Station	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City Washington State DC Zip Code 20002	Amount of Each Disbursement this Period 420.00
	Purpose of Disbursement Train Fare Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Loews Portofino Bay Hotel	Transaction ID: V6182ebdbdf058c336789
	Mailing Address 5601 Universal Boulevard	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City Orlando State FL Zip Code 32819	Amount of Each Disbursement this Period 281.25
	Purpose of Disbursement Hotel Accomodations Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) New York Palace	Transaction ID: V3eadfe3d2e4c81feb84
	Mailing Address 455 Madison Avenue	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City New York State NY Zip Code 10022	Amount of Each Disbursement this Period 1394.62
	Purpose of Disbursement Hotel Accomodations Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Sea Grill <hr/> Mailing Address 19 West 49th Street <hr/> City New York City State NY Zip Code 10020 <hr/> Purpose of Disbursement Hotel Accomodations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V3d93b40ba50a442161c Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 637.55
	[MEMO ITEM]
	Category/Type 001
B. Full Name (Last, First, Middle Initial) Sunny's Executive Sedan Service Inc. <hr/> Mailing Address 5252 Cherokee Ave. <hr/> City Alexandria State VA Zip Code 22312 <hr/> Purpose of Disbursement Car Service Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Va304c2bda7bbebd712c Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 350.00
	[MEMO ITEM]
	Category/Type 001
C. Full Name (Last, First, Middle Initial) The Georgetown Inn <hr/> Mailing Address 1310 Wisconsin Avenue, NW <hr/> City Washington State DC Zip Code 20007 <hr/> Purpose of Disbursement Hotel Accomodations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V35e00f0a000df9bca4b Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 1964.84
	[MEMO ITEM]
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional)	0.00
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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) US Airways <hr/> Mailing Address 4000 E. Sky Harbor Blvd <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Airfare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V7318837ad11574d2dc5 Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 166.20 <hr/> [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) US Airways <hr/> Mailing Address 4000 E. Sky Harbor Blvd <hr/> City Phoenix State AZ Zip Code 85034 <hr/> Purpose of Disbursement Airfare Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V3c911bf757ce37e9883 Date of Disbursement 03 / 11 / 2009 <hr/> Amount of Each Disbursement this Period 173.20 <hr/> [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) DePoy Sandra <hr/> Mailing Address 1201 15th Street, NW Suite 400 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Reimbursement of Expenses Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V856cd73cf395571d5dd Date of Disbursement 03 / 19 / 2009 <hr/> Amount of Each Disbursement this Period 7943.16 <hr/> See Attribution Below

SUBTOTAL of Disbursements This Page (optional) ▶

7943.16

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial)
Deer Valley Resort

Mailing Address Silver Lake Lodge

City Deer Valley State UT Zip Code 84060

Purpose of Disbursement Dinner Meeting

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: Ve54c6bee424ad4c3b56
Date of Disbursement 03 / 19 / 2009

Amount of Each Disbursement this Period 304.88

001
Category/Type

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
Dow Jones, L.P.

Mailing Address 102 First Avenue
Subscription Accounting Division

City Chicopee State MA Zip Code 01020

Purpose of Disbursement Wall Street Journal Subscription Renewal

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: V64dceedb7ee36570759
Date of Disbursement 03 / 19 / 2009

Amount of Each Disbursement this Period 431.46

001
Category/Type

[MEMO ITEM]

C. Full Name (Last, First, Middle Initial)
Il Mulino DC

Mailing Address 1110 Vermont Avenue, NW

City Washington State DC Zip Code 20005

Purpose of Disbursement Meeting Expense

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Transaction ID: V7b2bac5cc0374656c4c
Date of Disbursement 03 / 19 / 2009

Amount of Each Disbursement this Period 26.00

001
Category/Type

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ► 0.00

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Il Mulino DC	Transaction ID: V278a1f7d9724a1d7999
	Mailing Address 1110 Vermont Avenue, NW	Date of Disbursement 03 / 19 / 2009
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 66.10
	Purpose of Disbursement Meeting Expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Il Mulino DC	Transaction ID: V631809bb03ef510787d
	Mailing Address 1110 Vermont Avenue, NW	Date of Disbursement 03 / 19 / 2009
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 121.20
	Purpose of Disbursement Meeting Expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Il Mulino DC	Transaction ID: V23ccebbf774a9e192f8
	Mailing Address 1110 Vermont Avenue, NW	Date of Disbursement 03 / 19 / 2009
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 136.95
	Purpose of Disbursement Meeting Expense Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	0.00
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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Il Mulino DC <hr/> Mailing Address 1110 Vermont Avenue, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Meeting Expense Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Va7f7a378f7eee60eafe Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 300.53
	[MEMO ITEM]
	Category/Type 001
B. Full Name (Last, First, Middle Initial) Il Mulino DC <hr/> Mailing Address 1110 Vermont Avenue, NW <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Holiday Lunch Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vf03cef60253d9d4f499 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 158.00
	[MEMO ITEM]
	Category/Type 001
C. Full Name (Last, First, Middle Initial) Levy Restaurants <hr/> Mailing Address 601 F St, NW <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement Food/Beverage for PAC Event Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vff2f4bee8b4188877bd Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 2216.12
	[MEMO ITEM]
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) Smith & Wollensky</p> <p>Mailing Address 1112 Nineteenth Street, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Gift Card</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V2690984c391aa18c571</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="150.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Smith & Wollensky</p> <p>Mailing Address 1112 Nineteenth Street, NW</p> <p>City Washington State DC Zip Code 20036</p> <p>Purpose of Disbursement Dinner Meeting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Vf9ca8aaa166d1bcbe6a</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="114.40"/></p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) Southwest Airlines</p> <p>Mailing Address PO Box 36647</p> <p>City Dallas State TX Zip Code 75235</p> <p>Purpose of Disbursement Airfare</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V3ca2f94ae5d4524ce63</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="676.20"/></p> <p>[MEMO ITEM]</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="0.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

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

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

FOR LINE NUMBER: (check only one)

<input 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) The Chateaux at Silver Lake <hr/> Mailing Address 7825 Royal Street East <hr/> City Deer Valley State UT Zip Code 84060 <hr/> Purpose of Disbursement Hotel Accomodations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Va59a69cdc0923173d2c Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 1836.78
	[MEMO ITEM]
	Category/Type 001
B. Full Name (Last, First, Middle Initial) The Chateaux at Silver Lake <hr/> Mailing Address 7825 Royal Street East <hr/> City Deer Valley State UT Zip Code 84060 <hr/> Purpose of Disbursement Hotel Accomodations Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vb2d6b248d7ffa3aec1a Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 193.80
	[MEMO ITEM]
	Category/Type 001
C. Full Name (Last, First, Middle Initial) Florida House on Capitol Hill <hr/> Mailing Address 1 Second Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement Inaugural Event Tickets Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V68572-6486322283744 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 10000.00
	[MEMO ITEM]
	Category/Type 001

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Florida Tax Watch <hr/> Mailing Address 106 North Bronough Street <hr/> City Tallahassee State FL Zip Code 32302 Purpose of Disbursement Subscription Fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Ve95caa5da3654f3e406 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2009
	Amount of Each Disbursement this Period 5000.00 Category/Type: 001
B. Full Name (Last, First, Middle Initial) HM&C Center Stage, LLC <hr/> Mailing Address 1255 C Street, SE <hr/> City Washington State DC Zip Code 20003 Purpose of Disbursement Inaugural Sponsorship Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vb158c464ce752b12be8 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 15000.00 Category/Type: 001
C. Full Name (Last, First, Middle Initial) Leading Authorities, Inc. <hr/> Mailing Address 1220 L Street, NW Suite 850 <hr/> City Washington State DC Zip Code 20005 Purpose of Disbursement Speaker Fees Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V1cbee520591100b05bf Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 15750.00 Category/Type: 001

SUBTOTAL of Disbursements This Page (optional) ▶

35750.00

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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) Madsen Stephany</p> <p>Mailing Address 1201 15th Street, NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement ARDA AZ Legislative Breakfast Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V55ae4c29fc810e519e5 Date of Disbursement: 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1328.50</p> <p>001 Category/ Type</p> <p>See Attribution Below</p>
<p>B. Full Name (Last, First, Middle Initial) GES Exposition Services</p> <p>Mailing Address 2001 South 15th Avenue</p> <p>City Phoenix State AZ Zip Code 85007</p> <p>Purpose of Disbursement Breakfast Meeting Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V66f10447ecd39193aaa Date of Disbursement: 03 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1328.50</p> <p>001 Category/ Type</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) National Journal Group</p> <p>Mailing Address The Watergate 600 New Hampshire Ave., NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Subscription Renewal Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V951b77260b11bd1a6cb Date of Disbursement: 02 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 4228.94</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional)	5557.44
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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) National Journal Group</p> <p>Mailing Address The Watergate 600 New Hampshire Ave., NW</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Subscription Renewal</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V2c5ee81a3445401801e Date of Disbursement 04 / 07 / 2009</p> <p>Amount of Each Disbursement this Period 2113.94</p> <p>Category/Type 001</p>
<p>B. Full Name (Last, First, Middle Initial) Peter Fenn</p> <p>Mailing Address 2715 M Street, NW Suite 150</p> <p>City Washington State DC Zip Code 20007</p> <p>Purpose of Disbursement Speaking Fees</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V369f880d5124158d445 Date of Disbursement 02 / 24 / 2009</p> <p>Amount of Each Disbursement this Period 5500.00</p> <p>Category/Type 001</p>
<p>C. Full Name (Last, First, Middle Initial) Riley Kevin</p> <p>Mailing Address 1201 15th Street, NW Suite 400</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Reimbursement for Travel Expenses</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V735ef1241931ef70012 Date of Disbursement 03 / 11 / 2009</p> <p>Amount of Each Disbursement this Period 461.31</p> <p>Category/Type 001</p> <p>See Attribution Below</p>

SUBTOTAL of Disbursements This Page (optional)	8075.25
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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Riley Kevin Mailing Address 1201 15th Street, NW Suite 400 City Washington State DC Zip Code 20005 Purpose of Disbursement Reimbursement for Travel Expenses Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V7b8a610d0d0b36c3191 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 350.00 See Attribution Below
B.	Full Name (Last, First, Middle Initial) Loews Portofino Bay Hotel Mailing Address 5601 Universal Boulevard City Orlando State FL Zip Code 32819 Purpose of Disbursement Hotel Accomodations Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V2d2c308eabaebe9535d Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 562.50 [MEMO ITEM]
C.	Full Name (Last, First, Middle Initial) Loews Portofino Bay Hotel Mailing Address 5601 Universal Boulevard City Orlando State FL Zip Code 32819 Purpose of Disbursement Lunch Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vdfe26af5c4690c51065 Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 15.98 [MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶	350.00
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 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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

<p>A. Full Name (Last, First, Middle Initial) US Airways</p> <p>Mailing Address 4000 E. Sky Harbor Blvd</p> <p>City Phoenix State AZ Zip Code 85034</p> <p>Purpose of Disbursement Baggage Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V40807baf72ff56bc746</p> <p>Date of Disbursement</p> <p><input type="text" value="03"/> <input type="text" value="11"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="30.00"/></p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Russell Schriefer, Stevens & Schriefer Group</p> <p>Mailing Address 2120 L Street, NW Suite 510</p> <p>City Washington State DC Zip Code 20037</p> <p>Purpose of Disbursement Speakers Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: V49f60ecb3778a784337</p> <p>Date of Disbursement</p> <p><input type="text" value="02"/> <input type="text" value="24"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) The Conrad Group</p> <p>Mailing Address 426 C Street, NE</p> <p>City Washington State DC Zip Code 20002</p> <p>Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: Va9981dbc6df9121df6b</p> <p>Date of Disbursement</p> <p><input type="text" value="01"/> <input type="text" value="13"/> / <input type="text" value="2009"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="3000.00"/></p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="8500.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text"/></p>

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

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

FOR LINE NUMBER:
(check only one)

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<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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) The Conrad Group <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vdb58467a98ac794f841 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 4000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Conrad Group <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V48abea584652b5c23bd Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 4000.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) The Conrad Group <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 Purpose of Disbursement Retainer & Expenses for PAC Fundraising Consulting Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: Vb61bec389901afb9e01 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 3650.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

11650.00

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 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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) The Original U.S. Congress Handbook	Transaction ID: V21b4af1fb8785389100 Date of Disbursement M M / D D / Y Y Y Y 03 / 01 / 2009
	Amount of Each Disbursement this Period 1987.50
Mailing Address 8120 Woodmont Avenue Suite 110	
City Bethesda State MD Zip Code 26814	
Purpose of Disbursement Congressional Directories Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Original U.S. Congress Handbook	Transaction ID: V4a38c63a7096b240d24 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 1987.50
Mailing Address 8120 Woodmont Avenue Suite 110	
City Bethesda State MD Zip Code 26814	
Purpose of Disbursement Congressional Directories Candidate Name	001 Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3975.00

TOTAL This Period (last page this line number only)

438704.07

**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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) American Teleservices Association PAC <hr/> Mailing Address 3815 River Crossing Pkwy Suite 20 <hr/> City Indianapolis State IN Zip Code 46240 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name American Teleservices Association PAC <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 54504-5775720477104 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Aventurem <hr/> Mailing Address 1155 21st Street, NW Suite 330 <hr/> City Washington State DC Zip Code 20006 <hr/> Purpose of Disbursement Reception Candidate Name Erik Paulsen <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V0c41d70d77fd267f991 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 1 / 2 0 0 9
	Amount of Each Disbursement this Period 650.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bennett Election Committee Inc <hr/> Mailing Address 175 South West Temple Suite 650 <hr/> City Salt Lake City State UT Zip Code 84101 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Robert F. Bennett <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: UT District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 7cab773d0e2745796df Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

10650.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Bluegrass Committee Mailing Address 400 N Capitol St NW #585 City Washington State DC Zip Code 20001 Purpose of Disbursement 2009 Contribution Candidate Name Bluegrass Committee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: e55add983235c29a2dd Date of Disbursement 03 / 11 / 2009 Amount of Each Disbursement this Period 1000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Cantor for Congress Mailing Address PO Box 17813 City Richmond State VA Zip Code 23226 Purpose of Disbursement 2010 Primary Candidate Name Eric I. Cantor Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 18a7d7d1241a11d13b8 Date of Disbursement 02 / 24 / 2009 Amount of Each Disbursement this Period 5000.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Chris Lee for Congress Mailing Address PO Box 15395 City Rochester State NY Zip Code 14615 Purpose of Disbursement 2010 Primary Candidate Name Christopher John Lee Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 26 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 629913bc981dbd88ee1 Date of Disbursement 02 / 24 / 2009 Amount of Each Disbursement this Period 2000.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Citizens for Hope Responsibility Independence & Service Pac (CHRIS PAC) Mailing Address 607 14th Street, NW, Suite 800 Suite 800 City Washington State DC Zip Code 20005 Purpose of Disbursement 2009 Contribution Candidate Name Citizens for Hope Responsibility Independence & Service Pac (CHRIS PAC) Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 0a18dd7ae0e37415314 Date of Disbursement M M / D D / Y Y Y Y 03 / 19 / 2009
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Committee To Elect Alan Grayson Mailing Address PO Box 536447 City Orlando State FL Zip Code 32853 Purpose of Disbursement 2010 Primary Candidate Name Alan Mark Grayson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 696b828abb5c0ba3379 Date of Disbursement M M / D D / Y Y Y Y 03 / 11 / 2009
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Committee To Elect Alan Grayson Mailing Address PO Box 536447 City Orlando State FL Zip Code 32853 Purpose of Disbursement 2010 Primary Candidate Name Alan Mark Grayson Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 158b537fd0458aaa36e Date of Disbursement M M / D D / Y Y Y Y 04 / 14 / 2009
	Amount of Each Disbursement this Period 2000.00
	Category/Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Committee To Re-Elect Linda Sanchez <hr/> Mailing Address 1212 S. Victory Blvd Suite 211 <hr/> City Burbank State CA Zip Code 91502 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Linda T. Sanchez <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 39	Transaction ID: e226ab9d370d9ec0b2e Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2175.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Democratic Congressional Campaign Committee <hr/> Mailing Address 430 South Capitol Street, SE 2nd Floor <hr/> City Washington State DC Zip Code 20003 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Democratic Congressional Campaign Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 3473f6ee980e00c306f Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 15000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee <hr/> Mailing Address 120 Maryland Avenue NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Democratic Senatorial Campaign Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: d5e0ea52a21c587377c Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 15000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

32175.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Ed Royce for Congress		Transaction ID: ef7497c8d24d22d66d9	
	Mailing Address PO Box 2525		Date of Disbursement 04 / 07 / 2009	
	City Orange	State CA	Zip Code 92859	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement 2010 Primary		011	Category/ Type
Candidate Name Edward R. Royce				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 40				
B.	Full Name (Last, First, Middle Initial) Every Republican Is Crucial (ERICPAC)		Transaction ID: 542eeb0fa69e131cddb	
	Mailing Address 25 East Main Street, Suite 200		Date of Disbursement 04 / 14 / 2009	
	City Richmond	State VA	Zip Code 23219	Amount of Each Disbursement this Period 3700.00
	Purpose of Disbursement 2009 Contribution		011	Category/ Type
Candidate Name Every Republican Is Crucial (ERICPAC)				
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: District:		Contribution		
C.	Full Name (Last, First, Middle Initial) Friends of Erik Paulsen		Transaction ID: e1f23f89a402610da19	
	Mailing Address PO Box 44369 250 Prairie Center Drive		Date of Disbursement 02 / 24 / 2009	
	City Eden Prairie	State MN	Zip Code 55344	Amount of Each Disbursement this Period 4350.00
	Purpose of Disbursement 2010 Primary		011	Category/ Type
Candidate Name Erik Paulsen				
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MN District: 03				

SUBTOTAL of Disbursements This Page (optional) ▶

10050.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Friends of Erik Paulsen Mailing Address PO Box 44369 250 Prairie Center Drive City Eden Prairie State MN Zip Code 55344 Purpose of Disbursement 2010 General Candidate Name Erik Paulsen Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 578a5d1c2c35b96c4ac Date of Disbursement 04 / 07 / 2009	
	Amount of Each Disbursement this Period 2000.00	
	011 Category/ Type	
	Full Name (Last, First, Middle Initial) Friends of Sherrrod Brown Mailing Address PO Box 76187 Suite 800 City Washington State DC Zip Code 20013 Purpose of Disbursement 2012 Primary Candidate Name Sherrrod Brown Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: dbb83736f1396755f47 Date of Disbursement 03 / 11 / 2009
Amount of Each Disbursement this Period 1000.00		
011 Category/ Type	Full Name (Last, First, Middle Initial) Heath Shuler for Congress Mailing Address PO Box 8446 City Asheville State NC Zip Code 28814 Purpose of Disbursement 2010 Primary Candidate Name Heath Shuler Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 11 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: e05f60e71440e9ba2b3 Date of Disbursement 02 / 10 / 2009
Amount of Each Disbursement this Period 5000.00		
011 Category/ Type		

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Impact	Transaction ID: b39f47bf26054758d45 Date of Disbursement
	Mailing Address 509 Madison Ave. Suite 1902	<input type="text" value="03"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City New York State NY Zip Code 10022	Amount of Each Disbursement this Period
	Purpose of Disbursement 2009 Contribution Candidate Name Impact Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	<input type="text" value="011"/> Category/ Type
B.	Full Name (Last, First, Middle Initial) Jeanne Shaheen for Senate	Transaction ID: 76233-0945398211479 Date of Disbursement
	Mailing Address PO Box 1510	<input type="text" value="02"/> / <input type="text" value="10"/> / <input type="text" value="2009"/>
	City Manchester State NH Zip Code 03105	Amount of Each Disbursement this Period
	Purpose of Disbursement General 2008 Debt Retirement Candidate Name Jeanne Shaheen Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NH District:	<input type="text" value="011"/> Category/ Type
C.	Full Name (Last, First, Middle Initial) Judy Biggert for Congress	Transaction ID: f0f5d941005ea3a96bd Date of Disbursement
	Mailing Address PO Box 637	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Hinsdale State IL Zip Code 60522	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary Candidate Name Judy Biggert Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 13	<input type="text" value="011"/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

14350.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Kevin McCarthy for Congress	Transaction ID: 76233-6914483904838
	Mailing Address PO Box 12667	Date of Disbursement MM / DD / YYYY 02 / 12 / 2009
	City Bakersfield State CA Zip Code 93389	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement 2010 Primary Candidate Name Kevin McCarthy Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 22 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Kosmas for Congress	Transaction ID: 711421f94f720e4d9d7
	Mailing Address PO Box 1547	Date of Disbursement MM / DD / YYYY 03 / 11 / 2009
	City New Smyrna Beach State FL Zip Code 32170	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement 2010 Primary Candidate Name Suzanne M. Kosmas Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) Lance for Congress	Transaction ID: 76233-1654321551322
	Mailing Address PO Box 225	Date of Disbursement MM / DD / YYYY 02 / 10 / 2009
	City Colonia State NJ Zip Code 07067	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement 2010 Primary Candidate Name Leonard Lance Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 07 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

12000.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Majority Committee PAC--Mc Pac	Transaction ID: 76233-1590539813041 Date of Disbursement
	Mailing Address PO Box 10134	<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City Bakersfield State CA Zip Code 93389	Amount of Each Disbursement this Period
	Purpose of Disbursement 2009 Contribution	<input type="text" value="5000.00"/>
	Candidate Name Majority Committee PAC--Mc Pac	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Melissa Bean for Congress	Transaction ID: 4023f7fc4de0ab7ae48 Date of Disbursement
	Mailing Address PO Box 3068	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Barrington State IL Zip Code 60010	Amount of Each Disbursement this Period
	Purpose of Disbursement 2010 Primary	<input type="text" value="2175.00"/>
	Candidate Name Melissa Luburich Bean	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Moderate Victory Fund	Transaction ID: 24019-60406130552292 Date of Disbursement
	Mailing Address PO Box 83142	<input type="text" value="02"/> / <input type="text" value="09"/> / <input type="text" value="2009"/>
	City Gaithersburg State MD Zip Code 20883	Amount of Each Disbursement this Period
	Purpose of Disbursement Uncashed 5/20/08 Contribution	<input type="text" value="-5000.00"/>
	Candidate Name Moderate Victory Fund	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

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)

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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)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Nancy Pelosi for Congress	Transaction ID: cc212c45e4e89ecc67e Date of Disbursement 03 / 23 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement 2010 Primary Candidate Name Nancy Pelosi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
B.	Full Name (Last, First, Middle Initial) Nancy Pelosi for Congress	Transaction ID: 979f5abe47d536bb681 Date of Disbursement 03 / 23 / 2009
	Mailing Address 607 14th Street, NW Suite 800	Amount of Each Disbursement this Period 5000.00
	City Washington State DC Zip Code 20005	
	Purpose of Disbursement 2010 General Candidate Name Nancy Pelosi Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type
C.	Full Name (Last, First, Middle Initial) National Republican Congressional Committee	Transaction ID: 3bf975e436c84f78447 Date of Disbursement 02 / 10 / 2009
	Mailing Address 320 First Street	Amount of Each Disbursement this Period 15000.00
	City Washington State DC Zip Code 20003	
	Purpose of Disbursement 2009 Contribution Candidate Name National Republican Congressional Committee Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	011 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	25000.00
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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) National Republican Senatorial Committee <hr/> Mailing Address 425 Second Street NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name National Republican Senatorial Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 14ca90ec370d40bbdb0 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 15000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) New York State Democratic Committee <hr/> Mailing Address 461 Park Avenue South 10th Floor <hr/> City New York State NY Zip Code 10016 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name New York State Democratic Committee <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: bc7424f754f9e025533 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) PAC to the Future <hr/> Mailing Address 607 14th Street, NW Suite 800 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Pac to the Future <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 6eacd4d2e99fa9428cf Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

25000.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Pennsylvanians for Kanjorski <hr/> Mailing Address 103 South Hanover Street <hr/> City Nanticoke State PA Zip Code 18634 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Paul E. Kanjorski <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 11	Transaction ID: 316e05761f8bd2e68f3 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Real Estate Roundtable Political Action Committee (REAL-PAC) <hr/> Mailing Address 801 Pennsylvania Avenue Suite 720 <hr/> City Washington State DC Zip Code 20004 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name Real Estate Roundtable Political Action Committee (REALPAC) <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ State: District: Contribution	Transaction ID: 5e27e2ff21bde9141b9 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Richard E Neal for Congress Committee <hr/> Mailing Address 76 Magnolia Terrace <hr/> City Springfield State MA Zip Code 01108 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Richard E. Neal <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MA District: 02	Transaction ID: 85b07b33320d20a1912 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

9500.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Schock for Congress <hr/> Mailing Address PO Box 10555 <hr/> City Peoria State IL Zip Code 61612 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Aaron Schock <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 18 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: f4949f5be3dd6459dbd Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 4 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Scott Murphy for Congress <hr/> Mailing Address 615 Glen Street <hr/> City Glens Falls State NY Zip Code 12801 <hr/> Purpose of Disbursement 2009 Special Election Candidate Name Scott Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special	Transaction ID: 15ca93539d8d2ca8ae6 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special
C. Full Name (Last, First, Middle Initial) Scott Murphy for Congress <hr/> Mailing Address 615 Glen Street <hr/> City Glens Falls State NY Zip Code 12801 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Scott Murphy <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 15Da93539d8d2ca8ae6 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 9 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type 011
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) South Dakota First <hr/> Mailing Address PO Box 155 <hr/> City Sioux Falls State SD Zip Code 57101 <hr/> Purpose of Disbursement 2009 Contribution Candidate Name South Dakota First <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Contribution	Transaction ID: 99acefa614e6f41e9fe Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	011 Category/ Type
	In-Kind
B. Full Name (Last, First, Middle Initial) The Conrad Group <hr/> Mailing Address 426 C Street, NE <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Richard E. Neal <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V6c366c1c5fd0f5debd0 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 350.00
	011 Category/ Type
	In-Kind
C. Full Name (Last, First, Middle Initial) Wally Herger for Congress Committee <hr/> Mailing Address PO Box 1500 <hr/> City Chico State CA Zip Code 95927 <hr/> Purpose of Disbursement 2010 Primary Candidate Name Walter Herger, Jr. <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 265d7e7cd3bb4b71aff Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 2175.00
	011 Category/ Type
	In-Kind

SUBTOTAL of Disbursements This Page (optional) ▶

7525.00

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

188425.00

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 type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) American Hotel & Lodging Association <hr/> Mailing Address 1201 New York Avenue, NW #600 <hr/> City Washington State DC Zip Code 20005 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: V60381-3839380145072 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/Type 011
	State: District:
B. Full Name (Last, First, Middle Initial) Campaign to Elect John C. Land III <hr/> Mailing Address P.O. Box 138 <hr/> City Manning State SC Zip Code 29102 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 3f855af5bde00705ce2 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/Type 011
	State: District:
C. Full Name (Last, First, Middle Initial) Committee to Elect Alan Clemmons <hr/> Mailing Address 610 18th Avenue <hr/> City Myrtle Beach State SC Zip Code 29577 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: c54ce8e9f31446491f9 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	State: District:

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)

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

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Curren Price for Senate Mailing Address 770 L Street #950 City Sacramento State CA Zip Code 94814 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5fd615032ba49ba49c7 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1300.00 Category/Type: 011

B. Full Name (Last, First, Middle Initial) Democratic Governors Association Mailing Address 1401 K St., NW City Washington State DC Zip Code 20005 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 60381-9286767840385 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 9
	Amount of Each Disbursement this Period 25000.00 Category/Type: 011

C. Full Name (Last, First, Middle Initial) Florida Hispanic Legislative Caucus Mailing Address 110 South Monroe Suite H City Tallahassee State FL Zip Code 32301 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 03614295d0d1587671e Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00 Category/Type: 011

SUBTOTAL of Disbursements This Page (optional) ▶	31300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Foundation to Eradicate Duchenne	Transaction ID: V60049-3047143816947 Date of Disbursement
	Mailing Address PO Box 2371	<input type="text" value="01"/> / <input type="text" value="08"/> / <input type="text" value="2009"/>
	City Alexandria State VA Zip Code 22301	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Friends of Christine Kehoe for Senate 2012	Transaction ID: 81dbae402d6f0129dd4 Date of Disbursement
	Mailing Address 921 11 Street, Suite 904	<input type="text" value="04"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City Sacramento State CA Zip Code 95814	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="2200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) Friends of Jay Goyal	Transaction ID: e1e36e4cd754f86d3b4 Date of Disbursement
	Mailing Address 2584 Wahl Drive	<input type="text" value="04"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City Lexington State OH Zip Code 44094	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7700.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Friends of Ronald E. Russell		Transaction ID: 0973934d7d2605b6f89	
	Mailing Address P.O. Box 3259		Date of Disbursement MM / DD / YYYY 02 / 28 / 2009	
	City Kingshill	State VI	Zip Code 00851	Amount of Each Disbursement this Period -500.00
	Purpose of Disbursement Uncashed 10/6/08 Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
B.	Full Name (Last, First, Middle Initial) Friends of Tony Mendoza		Transaction ID: e67060be0e21a8c1ce2	
	Mailing Address 1127 11 Street, suite 2010		Date of Disbursement MM / DD / YYYY 04 / 16 / 2009	
	City Sacramento	State CA	Zip Code 95814	Amount of Each Disbursement this Period 2200.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				
C.	Full Name (Last, First, Middle Initial) George Hearn Campaign		Transaction ID: b4bb3bdc42b8686f966	
	Mailing Address 1100 Oak Street		Date of Disbursement MM / DD / YYYY 02 / 28 / 2009	
	City Conway	State SC	Zip Code 29526	Amount of Each Disbursement this Period -500.00
	Purpose of Disbursement Uncashed 10/10/08 Contribution		011 Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

SUBTOTAL of Disbursements This Page (optional) ▶

1200.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Grand Strand Statewide PAC	Transaction ID: 60381-5620996356010
	Mailing Address P.O. Box 8082	Date of Disbursement MM / DD / YYYY 01 / 08 / 2009
	City Myrtle Beach State SC Zip Code 29578	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type
B.	Full Name (Last, First, Middle Initial) Hee Clayton	Transaction ID: caeabdd811ac77ae4bb
	Mailing Address P.O. Box 4484	Date of Disbursement MM / DD / YYYY 02 / 10 / 2009
	City Kaneohe State HI Zip Code 96744	Amount of Each Disbursement this Period 300.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type
C.	Full Name (Last, First, Middle Initial) Herbkerman for the House	Transaction ID: e4044f7f077903e091b
	Mailing Address 151 Gascoigne Bluff	Date of Disbursement MM / DD / YYYY 04 / 10 / 2009
	City Bluffton State SC Zip Code 29910	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

4300.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Jackson for SC Senate <hr/> Mailing Address P.O. Box 7134 <hr/> City Columbia State SC Zip Code 29202 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: cc2c4a9a05d5b9d925f Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Jason Mumpower for Representative <hr/> Mailing Address PO Box 221 <hr/> City Briston State TN Zip Code 37621 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24180-9435846209526 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 2000.00
	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) John A. Perez for Assembly 2010 <hr/> Mailing Address 1100 O Street, Suite 200 <hr/> City Sacramento State CA Zip Code 95814 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 1032895b22e69afb626 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 4 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 56 / 62

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

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Merrill for South Carolina <hr/> Mailing Address P.O. Box 2011115 <hr/> City Charleston State SC Zip Code 29413 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: d4e4618186a21ed4b37 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Michael Thompson for the House <hr/> Mailing Address 1207 Cobbs Glenn Drive <hr/> City Anderson State SC Zip Code 29621 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: c56c14546b945dda12c Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Murrell Smith for the House <hr/> Mailing Address 123 Conyers Street <hr/> City Sumter State SC Zip Code 29152 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 8db2ab7d547e0bd67e8 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	1000.00
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) Palmetto Business Council		Transaction ID: ac1acd474ab213cc634	
	Mailing Address P.O. Box 8881		Date of Disbursement MM / DD / YYYY 03 / 04 / 2009	
	City Columbia	State SC	Zip Code 29202	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		
B.	Full Name (Last, First, Middle Initial) Palmetto Leadership Council		Transaction ID: 24180-7146875262260	
	Mailing Address P.O. Box 8883		Date of Disbursement MM / DD / YYYY 01 / 08 / 2009	
	City Columbia	State SC	Zip Code 29202	Amount of Each Disbursement this Period 3500.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		
C.	Full Name (Last, First, Middle Initial) Randy McNally for State Senate		Transaction ID: 24180-2812921404838	
	Mailing Address 94 Royal Troon Cir.		Date of Disbursement MM / DD / YYYY 01 / 13 / 2009	
	City Oak Ridge	State TN	Zip Code 37830	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Nonfederal Contribution		011 Category/ Type	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

8000.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) Rankin for Senate Mailing Address P.O. Box 7431 City Columbia State SC Zip Code 29202 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9f134f74ec987e019a8 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/Type
	State: District:

B. Full Name (Last, First, Middle Initial) Senate Republican Campaign Mailing Address 1220 Harrison Avenue City Salt Lake City State UT Zip Code 84105 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24180-2065088152885 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	011 Category/Type
	State: District:

C. Full Name (Last, First, Middle Initial) Senate Victory Mailing Address 214 S. Bronough Street City Tallahassee State FL Zip Code 32301 Purpose of Disbursement Nonfederal Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: afdc910f27a5aa68f7c Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	011 Category/Type
	State: District:

SUBTOTAL of Disbursements This Page (optional) ▶	6500.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) SenDemPac <hr/> Mailing Address 4571 Sycamore Drive <hr/> City Salt Lake City State UT Zip Code 84105 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 24180-6114923357963 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 3 / 2 0 0 9
	Amount of Each Disbursement this Period 250.00
	Category/Type 011
	State: District:
B. Full Name (Last, First, Middle Initial) South Carolina Black Caucus <hr/> Mailing Address 1105 Pendleton Street 207 Solomon Blatt Bldg. <hr/> City Columbia State SC Zip Code 29201 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: cc5e2bca45c1e607539 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	State: District:
C. Full Name (Last, First, Middle Initial) South Carolina House Democratic Caucus <hr/> Mailing Address P.O. Box 11484 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 726d856a0376fb305a2 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	State: District:

SUBTOTAL of Disbursements This Page (optional)	2250.00
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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.	Full Name (Last, First, Middle Initial) South Carolina House Republican Caucus	Transaction ID: 866a943287e26e45f23 Date of Disbursement
	Mailing Address P.O. Box 21	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Columbia State SC Zip Code 29202	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<input type="text" value="3500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) South Carolina Leadership PAC	Transaction ID: 3b07a7633e49c08618 Date of Disbursement
	Mailing Address PO Box 8881	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Columbia State SC Zip Code 29202	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<input type="text" value="3500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) South Carolina Senate Democratic Caucus	Transaction ID: 14d723d97c0455882a Date of Disbursement
	Mailing Address P.O. Box 11484	<input type="text" value="02"/> / <input type="text" value="20"/> / <input type="text" value="2009"/>
	City Columbia State SC Zip Code 29211	Amount of Each Disbursement this Period
	Purpose of Disbursement Nonfederal Contribution Candidate Name	<input type="text" value="3500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A. Full Name (Last, First, Middle Initial) South Carolina Senate Republican Caucus <hr/> Mailing Address Post Office Box 12012 <hr/> City Columbia State SC Zip Code 29211 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 2cb603bbe9bfd0b9e23 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 3500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) The Carolina Commerce Fund <hr/> Mailing Address P.O. Box 127 <hr/> City Lexington State SC Zip Code 29071 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: a1785380da56928fed8 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 9
	Amount of Each Disbursement this Period 3500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) The Committee to Elect Bill Harris <hr/> Mailing Address 1238 Township Road <hr/> City Ashland State OH Zip Code 44805 <hr/> Purpose of Disbursement Nonfederal Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 5c826101c45da0b6fa8 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 4 / 2 0 0 9
	Amount of Each Disbursement this Period 500.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ►

7500.00

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 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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN RESORT DEVELOPMENT ASSOCIATION RESORT OWNERS COALITION PAC (ARDA-ROC PA-C)

A.

Full Name (Last, First, Middle Initial)
Tim Scott for South Carolina House

Mailing Address 1901 Main Street, Suite 900

City State Zip Code
Columbia SC 29201

Purpose of Disbursement
Nonfederal Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: d6c8e5e5df514990f89

Date of Disbursement

MM / DD / YYYY
03 / 04 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

88250.00