

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 Dietetic Association Political Action Committee

ADDRESS (number and street) 1120 Connecticut Ave. NW
Suite 480
 Check if different than previously reported. (ACC)
Washington DC 20036

2. **FEC IDENTIFICATION NUMBER** C00143560
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 05 01 2009 through 05 31 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 Paul Mifsud

Signature of Treasurer Electronically Filed by Paul Mifsud Date 10 02 2009

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
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</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		47007.74
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	80902.94									
(c) Total Receipts (from Line 19)	58482.06	233546.49								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	139385.00	280554.23								
7. Total Disbursements (from Line 31)	11381.43	152550.66								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	128003.57	128003.57								
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 Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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)	4250.00	29019.76
(ii) Unitemized	54232.06	204526.73
(iii) TOTAL (add Lines 11(a)(i) and (ii)	58482.06	233546.49
(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)	58482.06	233546.49
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	58482.06	233546.49
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	58482.06	233546.49

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.....	1381.43	70550.66
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1381.43	70550.66
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	82000.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	11381.43	152550.66
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	11381.43	152550.66

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 20

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	58482.06	233546.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	58482.06	233546.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1381.43	70550.66
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1381.43	70550.66

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

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 Dietetic Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Jesse A Adames

Mailing Address 5138 Lahoma St

City State Zip Code
Dallas TX 75235-8822

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Medical Center of Mesquite Director Of Nutrition Services

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 05 / 04 / 2009
Transaction ID: 90617.C100497
Amount of Each Receipt this Period 200.00
Receipt

B. Full Name (Last, First, Middle Initial)
Veronica S Babin

Mailing Address 119 Green Oaks Dr

City State Zip Code
Lafayette LA 70503-2719

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SELF-EMPLOYED RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 05 / 07 / 2009
Transaction ID: 90518.C98344
Amount of Each Receipt this Period 250.00
Receipt

C. Full Name (Last, First, Middle Initial)
Nancy V Backeberg

Mailing Address Po Box 96

City State Zip Code
Pecatonica IL 61063-0096

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Rockford Memorial Hospital Clinical RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 05 / 20 / 2009
Transaction ID: 90617.C98867
Amount of Each Receipt this Period 200.00
Receipt

SUBTOTAL of Receipts This Page (optional) 650.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 20
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Jeanne Blankenship

Mailing Address 6231 Jack Frost Ct

City State Zip Code
Rocklin CA 95765-4234

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

Name of Employer Occupation
University of CA, Davis RD

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 2 / 2 0 0 9

Transaction ID: 90518.C98366

Amount of Each Receipt this Period
40.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Nancy Chapman

Mailing Address Ste 600
1050 17th St Nw

City State Zip Code
Washington DC 20036-5517

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

Name of Employer Occupation
N CHAPMAN ASSOCIATES President

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: 90617.C98937

Amount of Each Receipt this Period
250.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Linda S Dieleman

Mailing Address 11705 45th Ave N

City State Zip Code
Minneapolis MN 55442-2408

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

Name of Employer Occupation
ST PAUL PUBLIC SCHOOL DIETITIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 4 / 2 0 0 9

Transaction ID: 90617.C100555

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► **390.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Sylvia A Escott-Stump

Mailing Address 2405 Royal Drive
63 Fountain St

City State Zip Code
Winterville NC 28590-6279

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
East Carolina University Dietetic Program Director

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 05 / 26 / 2009
Transaction ID: 90617.C99090

Amount of Each Receipt this Period 100.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marion J Franz

Mailing Address 6635 Limerick Dr

City State Zip Code
Minneapolis MN 55439-1260

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
PRIVATE PRACTICE RD

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt 05 / 13 / 2009
Transaction ID: 90518.C98593

Amount of Each Receipt this Period 148.00

Receipt

C. Full Name (Last, First, Middle Initial)
Mary P Fuhrman

Mailing Address 1932 Prospector Ridge Dr

City State Zip Code
Ballwin MO 63011-4808

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
Coram, Inc. Chair of Dietetics

Receipt For: Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 05 / 26 / 2009
Transaction ID: 90617.C99071

Amount of Each Receipt this Period 60.00

Receipt

SUBTOTAL of Receipts This Page (optional) 308.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 20
(check only one)

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

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Frances A Gallagher

Mailing Address 14606 Gateside Dr

City State Zip Code
Fort Wayne IN 46814-7576

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

Name of Employer PRIVATE PRACTICE Occupation RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 20 / 2009

Transaction ID: 91002.C101691

Amount of Each Receipt this Period
250.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Shelia C Garner

Mailing Address 205 Sea Trace Lane

City State Zip Code
Newport NC 28570-0160

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

Name of Employer SELF-EMPLOYED Occupation RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
MM / DD / YYYY
05 / 13 / 2009

Transaction ID: 90518.C98514

Amount of Each Receipt this Period
200.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Lois L Good

Mailing Address Apt 175
4141 S Braeswood Blvd

City State Zip Code
Houston TX 77025-3357

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

Name of Employer RETIRED Occupation RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
MM / DD / YYYY
05 / 31 / 2009

Transaction ID: 90617.C99378

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional) ▶ **500.00**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 20
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A. Full Name (Last, First, Middle Initial)
Madeline D Houghton

Mailing Address 3211 S Manito Blvd

City State Zip Code
Spokane WA 99203-2629

FEC ID number of contributing federal political committee. C

Name of Employer: N/A @ PRESENT Occupation: RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
05 / 31 / 2009

Transaction ID: 90617.C99387

Amount of Each Receipt this Period
200.00

Receipt

B. Full Name (Last, First, Middle Initial)
Marian C Johnson

Mailing Address 4014 SW Holgate St

City State Zip Code
Seattle WA 98116-2017

FEC ID number of contributing federal political committee. C

Name of Employer: Fred Hutchinson Research Occupation: DIETITIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
302.00

Date of Receipt
05 / 04 / 2009

Transaction ID: 90617.C100626

Amount of Each Receipt this Period
50.00

Receipt

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

Mailing Address 4014 SW Holgate St

City State Zip Code
Seattle WA 98116-2017

FEC ID number of contributing federal political committee. C

Name of Employer: Fred Hutchinson Research Occupation: DIETITIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
352.00

Date of Receipt
05 / 31 / 2009

Transaction ID: 90617.C99448

Amount of Each Receipt this Period
50.00

Receipt

SUBTOTAL of Receipts This Page (optional) 300.00

TOTAL This Period (last page this line number only)

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

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

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kim L Jordan	Date of Receipt MM / DD / YYYY 05 / 26 / 2009
	Mailing Address 1008 6th Ave North # 302	Transaction ID: 90617.C99038
	City State Zip Code Seattle WA 98109	Amount of Each Receipt this Period 52.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Seattle CCA organization RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

B.	Full Name (Last, First, Middle Initial) Mary K Juntunen	Date of Receipt MM / DD / YYYY 05 / 26 / 2009
	Mailing Address 2246 Selmser Ave	Transaction ID: 90617.C99067
	City State Zip Code Cloquet MN 55720-2247	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation Benedictine healthcare RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) Quentin T Lawson Jr	Date of Receipt MM / DD / YYYY 05 / 13 / 2009
	Mailing Address 1305 Lakeshore Dr	Transaction ID: 90518.C98500
	City State Zip Code Griffin GA 30224-4729	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation SELF-EMPLOYED RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

SUBTOTAL of Receipts This Page (optional)	▶	452.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 20

(check only one)

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

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Donna W Lockner

Mailing Address 625 3rd St Ne
Unit 6

City State Zip Code
Washington DC 20002

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

Name of Employer Occupation
UNIVERSITY OF NEW MEXICO DIETITIAN

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
200.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 0 / 2 0 0 9

Transaction ID: 90617.C98932

Amount of Each Receipt this Period

200.00

Receipt

B.

Full Name (Last, First, Middle Initial)
Stephanie Patrick

Mailing Address Ste 480
1120 Connecticut Ave Nw

City State Zip Code
Washington DC 20036-3989

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

Name of Employer Occupation
American Dietetic Association Vice President, Gov. Relations

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 1 9 / 2 0 0 9

Transaction ID: 90519.C98802

Amount of Each Receipt this Period

100.00

Receipt

C.

Full Name (Last, First, Middle Initial)
Jessie M Pavlinac

Mailing Address 13147 Century Dr

City State Zip Code
Oregon City OR 97045-6700

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

Name of Employer Occupation
Oregon Health & Science Univ Director

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M / D D / Y Y Y Y Y
0 5 / 2 6 / 2 0 0 9

Transaction ID: 90617.C99015

Amount of Each Receipt this Period

50.00

Receipt

SUBTOTAL of Receipts This Page (optional)

350.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Janee Przybyl	Date of Receipt MM / DD / YYYY 05 / 13 / 2009
	Mailing Address 17 Woodland Creek Rd	Transaction ID: 90518.C98446
	City State Zip Code Savannah GA 31405-8124	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation US NAVY Executive	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

B.	Full Name (Last, First, Middle Initial) Kathryn P Sucher	Date of Receipt MM / DD / YYYY 05 / 26 / 2009
	Mailing Address 1152 Laurie Ave	Transaction ID: 90617.C98996
	City State Zip Code San Jose CA 95125-3411	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation N/A @ PRESENT RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 200.00	

C.	Full Name (Last, First, Middle Initial) Paula H Tsufis	Date of Receipt MM / DD / YYYY 05 / 12 / 2009
	Mailing Address 2328 E 3rd St	Transaction ID: 90518.C98367
	City State Zip Code Duluth MN 55812-1851	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	Receipt
	Name of Employer Occupation SELF EMPLOYED RD	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

SUBTOTAL of Receipts This Page (optional)	▶	800.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 20
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)
American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Mary W Vester-Toews

Mailing Address 2099 W Via Tivoli

City State Zip Code
Fresno CA 93711-2885

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

Name of Employer Occupation
N/A @ PRESENT RD

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	0	9

Transaction ID: 90617.C100594

Amount of Each Receipt this Period
500.00

Receipt

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	4250.00

**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 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 Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) American Dietetic Association	Transaction ID: 90617.E2064 Date of Disbursement 05 / 21 / 2009
	Mailing Address 120 S Riverside Plz Suite 2000	Amount of Each Disbursement this Period 900.00
	City Chicago State IL Zip Code 60606-3913	
	Purpose of Disbursement PAC Software	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) ▼
		PAC SOFTWARE

B.	Full Name (Last, First, Middle Initial) U.S. Postal Service	Transaction ID: 90518.E2063 Date of Disbursement 05 / 11 / 2009
	Mailing Address 1050 Connecticut Ave NW	Amount of Each Disbursement this Period 210.00
	City Washington State DC Zip Code 20036-5308	
	Purpose of Disbursement ADPAC monthly mailings	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) ▼
		ADPAC MONTHLY MAILINGS

C.	Full Name (Last, First, Middle Initial) Ronald Smith	Transaction ID: 90617.E2075 Date of Disbursement 05 / 21 / 2009
	Mailing Address Ste 480 1120 Connecticut Ave NW	Amount of Each Disbursement this Period 251.43
	City Washington State DC Zip Code 20036-3989	
	Purpose of Disbursement REIMBURSEMENT: SEE BELOW	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) ▼
		REIMBURSEMENT: SEE BELOW

SUBTOTAL of Disbursements This Page (optional)	▶	1361.43
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 / 20

<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 Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)

Sanderling Resort and Spa

Mailing Address 1461 Duck Road

City
Kitty Hawk

State
NC

Zip Code
27949-

Purpose of Disbursement
Event Travel - Sen. Burr

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: 90617.E2076

Date of Disbursement

/ /

Amount of Each Disbursement this Period

251.43

[MEMO ITEM]

MEMO: EVENT TRAVEL - SEN.
BURR

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

1361.43

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 Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Kathy Castor Mailing Address 301 W. Platt Street #385 City Tampa State FL Zip Code 33606- Purpose of Disbursement REP. KATHY CASTOR (D-FL-11) Candidate Name KATHY CASTOR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 11 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90617.E2073 Date of Disbursement 05 / 21 / 2009	Amount of Each Disbursement this Period 1000.00 REP. KATHY CASTOR (D-FL-1-1)
B.	Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress Mailing Address 530 Seminole Dr City Erie State PA Zip Code 16505-2428 Purpose of Disbursement REP. KATHY DAHLKEMPER (D-PA) Candidate Name KATHLEEN DAHLKEMPER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90617.E2071 Date of Disbursement 05 / 21 / 2009	Amount of Each Disbursement this Period 1000.00 REP. KATHY DAHLKEMPER (D-PA)
C.	Full Name (Last, First, Middle Initial) Senator Charles E. Grassley Mailing Address GRASSLEY COMMITTEE PO Box 1000 City Des Moines State IA Zip Code 50304- Purpose of Disbursement SEN. CHARLES GRASSLEY (R-IA) Candidate Name CHARLES E GRASSLEY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 90617.E2079 Date of Disbursement 05 / 21 / 2009	Amount of Each Disbursement this Period 500.00 SEN. CHARLES GRASSLEY (R-IA)

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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 Dietetic Association Political Action Committee

<p>A. Full Name (Last, First, Middle Initial) Senator Charles E. Grassley</p> <p>Mailing Address GRASSLEY COMMITTEE PO Box 1000</p> <p>City Des Moines State IA Zip Code 50304-</p> <p>Purpose of Disbursement SEN. CHARLES GRASSLEY (R-IA)</p> <p>Candidate Name CHARLES E GRASSLEY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90617.E2065 Date of Disbursement: 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>SEN. CHARLES GRASSLEY (R-IA)</p>
<p>B. Full Name (Last, First, Middle Initial) Johanns for U.S. Senate</p> <p>Mailing Address 1201 O St Suite 101</p> <p>City Lincoln State NE Zip Code 68508-1420</p> <p>Purpose of Disbursement SEN. MIKE JOHANNIS (R-NE)</p> <p>Candidate Name MICHAEL O JOHANNIS</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00</p> <p>Disbursement For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90617.E2066 Date of Disbursement: 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>SEN. MIKE JOHANNIS (R-NE)</p>
<p>C. Full Name (Last, First, Middle Initial) Congresswoman Carolyn McCarthy</p> <p>Mailing Address FRIENDS OF CAROLYN MCCARTHY 151 Linden Road</p> <p>City Mineola State NY Zip Code 11501-</p> <p>Purpose of Disbursement REP. CAROLYN MCCARTHY (D-NY)</p> <p>Candidate Name CAROLYN MCCARTHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 90617.E2074 Date of Disbursement: 05 / 21 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. CAROLYN MCCARTHY (D-NY)</p>

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)

<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 Dietetic Association Political Action Committee

A.	Full Name (Last, First, Middle Initial) Congressman Tim F. Murphy	Transaction ID: 90617.E2072 Date of Disbursement 05 / 21 / 2009
	Mailing Address Murphy for Congress 46 Ordale Rd	Amount of Each Disbursement this Period 1000.00
	City Pittsburgh	State PA
	Zip Code 15228-	Category/ Type
	Purpose of Disbursement REP. TIM MURPHY (R-PA-18)	REP. TIM MURPHY (R-PA-18)
	Candidate Name TIM MURPHY	
	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: 18	

B.	Full Name (Last, First, Middle Initial) Friends of Schumer	Transaction ID: 90617.E2067 Date of Disbursement 05 / 21 / 2009
	Mailing Address 1551 East 23rd Street	Amount of Each Disbursement this Period 1000.00
	City Brooklyn	State NY
	Zip Code 11210-	Category/ Type
	Purpose of Disbursement SEN. CHARLES SCHUMER (D-NY)	SEN. CHARLES SCHUMER (D-NY)
	Candidate Name CHARLES E SCHUMER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NY District: 00	

C.	Full Name (Last, First, Middle Initial) Zack Space for Congress Committee	Transaction ID: 90617.E2069 Date of Disbursement 05 / 21 / 2009
	Mailing Address 726 Sixteenth Street, NE	Amount of Each Disbursement this Period 1000.00
	City Massillon	State OH
	Zip Code 44646-	Category/ Type
	Purpose of Disbursement REP. ZACK SPACE (D-OH-18)	REP. ZACK SPACE (D-OH-18)
	Candidate Name ZACHARY T SPACE	
	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: OH District: 18	

SUBTOTAL of Disbursements This Page (optional)	▶	3000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 20 / 20

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

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NAME OF COMMITTEE (In Full)

American Dietetic Association Political Action Committee

A.

Full Name (Last, First, Middle Initial)
Congressman Patrick J. Tiberi

Transaction ID: 90617.E2068

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	1		2	0	0	9

Mailing Address Tiberi for Congress
217 3rd Street, SE

City Washington State DC Zip Code 20003-

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
REP. PAT TIBERI (R-OH)

Category/
Type

Candidate Name
PATRICK J TIBERI

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

REP. PAT TIBERI (R-OH)

State: OH District: 12

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

10000.00
