

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 48 Washington DC 20036 Check if different than previously reported. (ACC)

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

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 06 01 2008 through 06 30 2008

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 M. Stephanie Patrick

Signature of Treasurer Electronically Filed by M. Stephanie Patrick Date 08 20 2008

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 grid and FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		25677.54
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	60148.35									
(c) Total Receipts (from Line 19)	30413.00	157774.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	90561.35	183451.70								
7. Total Disbursements (from Line 31)	23617.41	116507.76								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	66943.94	66943.94								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
American Dietetic Association Political Action Committee

Report Covering the Period: From:

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	1422.00	24063.00
(i) Itemized (use Schedule A)	28991.00	133711.16
(ii) Unitemized	30413.00	157774.16
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	30413.00	157774.16
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))	30413.00	157774.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	30413.00	157774.16

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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.....	11242.41	54107.76
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11242.41	54107.76
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	12375.00	62375.00
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	25.00
(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	25.00
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))..	23617.41	116507.76
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23617.41	116507.76

DETAILED SUMMARY PAGE
of Disbursements

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	30413.00	157774.16
34. Total Contribution Refunds (from Line 28(d))	0.00	25.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	30413.00	157749.16
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11242.41	54107.76
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11242.41	54107.76

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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) Donna Smith Becker		Date of Receipt MM / DD / YYYY 06 / 03 / 2008		
	Mailing Address 502 W Kingsley Dr		Transaction ID: 80617.C91145		
	City Arlington Heights	State IL	Zip Code 60004-1312	Amount of Each Receipt this Period 500.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer Donna Becker Consulting INC	Occupation RD	Aggregate Year-to-Date 500.00		

B.	Full Name (Last, First, Middle Initial) M Amanda Brown		Date of Receipt MM / DD / YYYY 06 / 06 / 2008		
	Mailing Address 103 Meadow Lake Farms		Transaction ID: 80617.C91364		
	City Calera	State AL	Zip Code 35040-5590	Amount of Each Receipt this Period 250.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer University of Alabama - Birmin	Occupation RD	Aggregate Year-to-Date 250.00		

C.	Full Name (Last, First, Middle Initial) Elissa R Cruz		Date of Receipt MM / DD / YYYY 06 / 03 / 2008		
	Mailing Address 20655 Walnut Valley Dr		Transaction ID: 80617.C91156		
	City Walnut	State CA	Zip Code 91789-1025	Amount of Each Receipt this Period 20.00	
	FEC ID number of contributing federal political committee. C		Receipt		
	Name of Employer E.C. Nutrition Solutions	Occupation RD	Aggregate Year-to-Date 270.00		

SUBTOTAL of Receipts This Page (optional)	770.00
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 7 / 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A.	Full Name (Last, First, Middle Initial) Suzanne C Cryst		Date of Receipt
	Mailing Address 430 Acorn Dr		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Dayton	OH	45419-3904
	FEC ID number of contributing federal political committee. C		Transaction ID: 80617.C91686
Name of Employer N/A @ PRESENT		Occupation RD	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"/> 52.00
		<input type="text"/> 202.00	Receipt

B.	Full Name (Last, First, Middle Initial) Susan S Daniel		Date of Receipt
	Mailing Address 4269 E Berkeley St		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Springfield	MO	65809-3521
	FEC ID number of contributing federal political committee. C		Transaction ID: 80701.C92073
Name of Employer St. Johns Health System		Occupation DIETITIAN	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"/> 100.00
		<input type="text"/> 200.00	Receipt

C.	Full Name (Last, First, Middle Initial) Julie Rye Dostal		Date of Receipt
	Mailing Address 10338 N 1750 East Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Bloomington	IL	61704-5950
	FEC ID number of contributing federal political committee. C		Transaction ID: 80617.C91205
Name of Employer UNEMPLOYED		Occupation DIETITIAN	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"/> 200.00
		<input type="text"/> 300.00	Receipt

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 352.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 8 / 16
(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)
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 ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 80617.C91267

Amount of Each Receipt this Period
50.00

Receipt

B. Full Name (Last, First, Middle Initial)
Martha H. Hunt

Mailing Address 1091 Revere Dr

City State Zip Code
Oconomowoc WI 53066-4422

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

Name of Employer Occupation
Milwaukee Technical College Professor

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt
MM / DD / YYYY
06 / 16 / 2008

Transaction ID: 80617.C91718

Amount of Each Receipt this Period
100.00

Receipt

C. 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 ▼ 300.00

Date of Receipt
MM / DD / YYYY
06 / 04 / 2008

Transaction ID: 80617.C91336

Amount of Each Receipt this Period
100.00

Receipt

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 / 16

(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) Jessie M Pavlinac		Date of Receipt																					
	Mailing Address 13147 Century Dr		<table border="1" style="font-size: small;"> <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>6</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	4		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		0	4		2	0	0	8														
	City	State	Zip Code		Transaction ID: 80617.C91183																			
	Oregon City	OR	97045-6700																					
FEC ID number of contributing federal political committee.		C		Amount of Each Receipt this Period																				
Name of Employer N/A @ PRESENT		Occupation Clinical Nutrition Manager		50.00																				
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		Receipt																				
		700.00																						

SUBTOTAL of Receipts This Page (optional)	50.00
TOTAL This Period (last page this line number only)	1422.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 16
	<input checked="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

<p>A. Full Name (Last, First, Middle Initial) Membership Marketing Services, Inc.</p> <p>Mailing Address Attn. Fran Carille 1280 Perimeter Parkway</p> <p>City Virginia Beach State VA Zip Code 23454-5689</p> <p>Purpose of Disbursement ADAPAC fundraising expenses</p> <p>Candidate Name _____ Category/Type _____</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Transaction ID: 80617.E1881 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 8589.56</p> <p>ADAPAC FUNDRAISING EXPENSES</p>
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<p>B. Full Name (Last, First, Middle Initial) U.S. Postal Service</p> <p>Mailing Address 1050 Connecticut Ave NW</p> <p>City Washington State DC Zip Code 20036-5308</p> <p>Purpose of Disbursement PAC Monthly Mailings</p> <p>Candidate Name _____ Category/Type _____</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Transaction ID: 80617.E1880 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 166.50</p> <p>PAC MONTHLY MAILINGS</p>
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<p>C. Full Name (Last, First, Middle Initial) Ronald Smith</p> <p>Mailing Address Ste 480 1120 Connecticut Ave Nw</p> <p>City Washington State DC Zip Code 20036-3989</p> <p>Purpose of Disbursement REIMBURSEMENT: SEE BELOW</p> <p>Candidate Name _____ Category/Type _____</p> <p>Office Sought: <input type="checkbox"/> House Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Senate <input type="checkbox"/> Other (specify) ▼ <input type="checkbox"/> President</p> <p>State: _____ District: _____</p>	<p>Transaction ID: 80701.E1897 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1596.37</p> <p>REIMBURSEMENT: SEE BELOW</p>
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SUBTOTAL of Disbursements This Page (optional)	10352.43
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)

<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

<p>A. Full Name (Last, First, Middle Initial) United Airlines</p> <p>Mailing Address Thomas Ave & Abingdon</p> <p>City Arlington State VA Zip Code 22202-</p> <p>Purpose of Disbursement flight fundraiser Rep. Upton (R-MI)</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: 80701.E1898</p> <p>Date of Disbursement 06 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 453.50</p> <p>[MEMO ITEM] MEMO: FLIGHT FUNDRAISER REP. UPTON (R-MI)</p>
<p>B. Full Name (Last, First, Middle Initial) Park Hyatt Chicago</p> <p>Mailing Address 800 North Michigan Ave</p> <p>City Chicago State IL Zip Code 60611-</p> <p>Purpose of Disbursement Hotel fundraiser Rep. Upton (R-MI)</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: 80701.E1899</p> <p>Date of Disbursement 06 / 26 / 2008</p> <p>Amount of Each Disbursement this Period 1017.87</p> <p>[MEMO ITEM] MEMO: HOTEL FUNDRAISER RE-P. UPTON (R-MI)</p>
<p>C. Full Name (Last, First, Middle Initial) Jennifer A Weber</p> <p>Mailing Address 4819 1st St S</p> <p>City Arlington State VA Zip Code 22204-1315</p> <p>Purpose of Disbursement REIMBURSEMENT: SEE BELOW</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: 80617.E1888</p> <p>Date of Disbursement 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 889.98</p> <p>REIMBURSEMENT: SEE BELOW</p>

SUBTOTAL of Disbursements This Page (optional) ▶

889.98

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 12 / 16

<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)

The Sanderling

Mailing Address 1461 Duck Road

City
Kitty Hawk

State Zip Code
NC 27949-

Purpose of Disbursement
Sen. Richard Burr (R-NC)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: 80617.E1889

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

611.22

[MEMO ITEM]

MEMO: SEN. RICHARD BURR
(R-NC)

SUBTOTAL of Disbursements This Page (optional)

0.00

TOTAL This Period (last page this line number only)

11242.41

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) Susan Bitter Smith for Congress <hr/> Mailing Address 5086 E. Lewis Ave <hr/> City State Zip Code Scottsdale AZ 85257- <hr/> Purpose of Disbursement SUSAN BITTER SMITH (R-AZ-3) Candidate Name Susan Bitter Smith <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: 80617.E1886 Date of Disbursement 06 / 13 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> SUSAN BITTER SMITH (R-AZ-3)
	Category/ Type
B. Full Name (Last, First, Middle Initial) Richard Burr <hr/> Mailing Address PO Box 5928 <hr/> City State Zip Code Winston Salem NC 27113-5928 <hr/> Purpose of Disbursement SEN. RICHARD BURR (R-NC) Candidate Name RICHARD M BURR <hr/> 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: NC District: 00	Transaction ID: 80620.E1893 Date of Disbursement 06 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00 <hr/> SEN. RICHARD BURR (R-NC)
	Category/ Type
C. Full Name (Last, First, Middle Initial) Kathy Dahlkemper for Congress <hr/> Mailing Address 530 Seminole Dr <hr/> City State Zip Code Erie PA 16505-2428 <hr/> Purpose of Disbursement KATHY DAHLKEMPER (D-PA-3) Candidate Name KATHLEEN ANN DAHLKEMPER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input 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: PA District: 03	Transaction ID: 80620.E1892 Date of Disbursement 06 / 18 / 2008 <hr/> Amount of Each Disbursement this Period 375.00 <hr/> KATHY DAHLKEMPER (D-PA-3)
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

2375.00

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) Congresswoman Diana DeGette	Transaction ID: 80617.E1884 Date of Disbursement 06 / 13 / 2008
	Mailing Address DIANA DEGETTE FOR CONGRESS INC P.O. Box 61337	Amount of Each Disbursement this Period 1000.00
	City: Denver State: CO Zip Code: 80206-8337	
	Purpose of Disbursement REP. DIANA DEGETTE (D-CO-1)	Category/Type
	Candidate Name DIANA L DEGETTE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		REP. DIANA DEGETTE (D-CO-1)

B.	Full Name (Last, First, Middle Initial) Friends of Dick Durbin	Transaction ID: 80620.E1895 Date of Disbursement 06 / 18 / 2008
	Mailing Address 200 East Jefferson Street	Amount of Each Disbursement this Period 1000.00
	City: Falls Church State: VA Zip Code: 22046-	
	Purpose of Disbursement SEN. DICK DURBIN (D-IL)	Category/Type
	Candidate Name RICHARD J DURBIN	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		SEN. DICK DURBIN (D-IL)

C.	Full Name (Last, First, Middle Initial) Johanns for U.S. Senate	Transaction ID: 80617.E1887 Date of Disbursement 06 / 13 / 2008
	Mailing Address 1201 O Street Suite 101	Amount of Each Disbursement this Period 1000.00
	City: Lincoln State: NE Zip Code: 68506-	
	Purpose of Disbursement MIKE JOHANNNS (R-NE)	Category/Type
	Candidate Name MICHAEL O JOHANNNS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		MIKE JOHANNNS (R-NE)

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<p>A. Full Name (Last, First, Middle Initial) Johanns for U.S. Senate</p> <p>Mailing Address 1201 O Street Suite 101</p> <p>City Lincoln State NE Zip Code 68506-</p> <p>Purpose of Disbursement MIKE JOHANNNS (R-NE)</p> <p>Candidate Name MICHAEL O JOHANNNS</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80620.E1894 Date of Disbursement: 06 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>MIKE JOHANNNS (R-NE)</p>
<p>B. Full Name (Last, First, Middle Initial) Senator Jon Kyl</p> <p>Mailing Address Jon Kyl for U S Senate Post Office Box 10246</p> <p>City Phoenix State AZ Zip Code 85064-</p> <p>Purpose of Disbursement SEN. JON KYL (R-AZ)</p> <p>Candidate Name JON L KYL</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AZ 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: 80617.E1885 Date of Disbursement: 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>SEN. JON KYL (R-AZ)</p>
<p>C. Full Name (Last, First, Middle Initial) Congressman Tim F. Murphy</p> <p>Mailing Address Murphy for Congress 46 Ordale Rd</p> <p>City Pittsburgh State PA Zip Code 15228-</p> <p>Purpose of Disbursement REP. TIM MURPHY (R-PA-18)</p> <p>Candidate Name TIM MURPHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 80617.E1883 Date of Disbursement: 06 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>REP. TIM MURPHY (R-PA-18)</p>

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A. Full Name (Last, First, Middle Initial) TRUST PAC Mailing Address 104 Hume Ave City Alexandria State VA Zip Code 22301-1015 Purpose of Disbursement REP. FRED UPTON (R-MI-6) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80620.E1896 Date of Disbursement 06 / 18 / 2008
	Amount of Each Disbursement this Period 3000.00 REP. FRED UPTON (R-MI-6)
B. Full Name (Last, First, Middle Initial) Friends of Joe Pitts Mailing Address P.O. Box 775 City Unionville State PA Zip Code 19375- Purpose of Disbursement REP. JOE PITTS (R-PA-16) Candidate Name JOSEPH R PITTS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 16 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 80617.E1882 Date of Disbursement 06 / 13 / 2008
	Amount of Each Disbursement this Period 1000.00 REP. JOE PITTS (R-PA-16)

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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

12375.00