

FEC FORM 1

STATEMENT OF ORGANIZATION

(See Instructions)

Office Use Only

1. NAME OF COMMITTEE (in full) (Check if name is changed) Example: If typing, type over the lines 12FE4M5

American Society of Travel Agents PAC

ADDRESS (Number and street) (Check if address is changed)

1101 King Street
Suite 200
Alexandria VA 22314

CITY STATE ZIP CODE

COMMITTEE'S E-MAIL ADDRESS

COMMITTEE'S WEB PAGE ADDRESS (URL)

COMMITTEE'S FAX NUMBER

2. DATE 07 / 21 / 2005

3. FEC IDENTIFICATION NUMBER C C00114108

4. IS THIS STATEMENT NEW (N) OR AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete

Type or Print Name of Treasurer Barbara E. O'Hara

Signature of Treasurer Electronically Filed by Barbara E. O'Hara Date 07 / 21 / 2005

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. 5437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS

Office Use Only				
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For further information contact:
Federal Election Commission
Toll Free 800-424-9530
Local 202-894-1100

FEC FORM 1
(Revised 02/2003)

5. TYPE OF COMMITTEE (Check One)

- (a) This committee is a principal campaign committee. (Complete the candidate information below.)
- (b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)

Name of Candidate _____

Candidate Party Affiliation	Office Sought:	House	Senate	President	State District
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- (c) This committee supports/opposes only one candidate, and is NOT an authorized committee.

Name of Candidate _____

- (d) This committee is a _____ (National, State (or subordinate) committee of the _____ (Democratic, Republican, etc.) Party.

- (e) This committee is a separate segregated fund

- (f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee.

6. Name of Any Connected Organization or Affiliated Committee

American Society of Travel Agents _____

Mailing Address _____ 1101 King Street _____

_____ Suite 200 _____

_____ Alexandria _____ VA _____ 22314 - _____

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship | Connected _____

Type of Connected Organization:

- | | | |
|-------------------------|---|--------------------|
| Corporation | Corporation w/o Capital Stock | Labor Organization |
| Membership Organization | <input checked="" type="checkbox"/> Trade Association | Cooperative |

Write or Type Committee Name

American Society of Travel Agents PAC

7. **Custodian of Records:** Identify by name, address, (phone number -- optional), and position of the person in possession of Committee books and records.

Full Name Barbara E. O'Hara

Mailing Address 1101 King Street
Suite 200
Alexandria VA 22314

Title or Position ▼ Assistant Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 703 - 739 - 6842

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name of Treasurer Mr. John F. Haskins

Mailing Address 610 N. Washington Street
Naperville IL 60563 - 3165

Title or Position ▼ Treasurer CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number 630 - 963 - 1766

Full Name of Designated Agent _____

Mailing Address _____

Title or Position ▼ _____ CITY ▲ STATE ▲ ZIP CODE ▲
 Telephone number _____ - _____ - _____

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

PNC Bank

Mailing Address

W.W. Corcoran Office

Washington

DC

20005 - 1079

CITY Δ

STATE Δ

ZIP CODE Δ

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

PNC Bank, N.A.

Mailing Address

249 5th Ave.

Pittsburgh

PA

15222 - 2707

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position ▼

CITY ▲

STATE▲

ZIP CODE ▲

Telephone number _____ - _____ - _____

Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

[ADDITIONAL]

Merrill Lynch Ready Assets

Mailing Address

P.O. Box 11063

Church Station

NY

10249 -

CITY ▲

STATE ▲

ZIP CODE ▲

Name of Any Connected Organization or Affiliated Committee

[ADDITIONAL]

Mailing Address

CITY ▲

STATE ▲

ZIP CODE ▲

Relationship

Type of Connected Organization:

Corporation

Corporation w/o Capital Stock

Labor Organization

Membership Organization

Trade Association

Cooperative

Designated Agent

[ADDITIONAL]

Full Name _____

Mailing Address _____

Title or Position ▼ CITY ▲ STATE ▲ ZIP CODE ▲

_____ Telephone number _____ - _____ - _____
