

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

REC'D  
JAN 23 2 59 PM '96

1. NAME OF COMMITTEE (in full) American Society of Travel Agents PAC		2. FEC IDENTIFICATION NUMBER C00114108
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported 1101 King Street		
CITY, STATE and ZIP CODE Alexandria, VA 22314		

3.  This committee has qualified as a multicandidate committee. (See FEC FORM LM)

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

- Monthly Report Due On:
- |                                      |                                       |  |
|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20            |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20           |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20           |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input checked="" type="checkbox"/> January 31 |

Twelfth day report preceding \_\_\_\_\_ (Type of Election)  
election on \_\_\_\_\_ in the State of \_\_\_\_\_  
  
 Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/95</u> through <u>12/31/95</u>		
6. (a) Cash on Hand January 1, 1995 .....		\$ 44,781.41
(b) Cash on Hand at Beginning of Reporting Period.....	\$ 31,983.87	
(c) Total Receipts (from line 19).....	\$ 20,217.13	\$ 40,424.02
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	\$ 53,201.98	\$ 85,205.43
7. Total Disbursements (from Line 30).....	\$ 7,468.37	\$ 39,472.82
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))..	\$ 45,733.61	\$ 45,732.61
9. Debts and Obligations (owed TO the Committee Itemize all on Schedule C and/or Schedule D) .....	\$ 0.00	For further information: Federal Election Commission 959 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee Itemize all on Schedule C and/or Schedule D) .....	\$ 0.00	

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  
Thomas J. Rincuna

Signature of Treasurer *Thomas J. Rincuna* Date 1-23-96

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

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE American Society of Travel Agents PAC		REPORT COVERING PERIOD	
		FROM: 07/01/95	TO: 12/31/95
		COLUMN A Total This Period	COLUMN B Calendar Year
<b>I. Receipts</b>			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (Use Schedule A).....	5,200.00	6,200.00	
ii. Unitemized.....	14,260.80	32,848.80	
iii. Total.....(add i and ii) >	19,460.80	39,048.80	
b. Political Party Committees.....	0.00	0.00	
c. Other Political Committees (such as PACs).....	0.00	0.00	
d. Total Contributions.....(add aiii b and c) >	19,460.80	39,048.80	
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.).....	0.00	0.00	
16. Refunds of Contributions Made to Federal Candidates and Other PACs.....	150.00	150.00	
17. Other Federal Receipts (Dividends, Interest, etc.).....	606.31	1,225.22	
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00	
19. Total Receipts.....(add 11d, 12, 13, 14, 15, 16, 17, and 18) >	20,217.11	40,424.02	
20. Total Federal Receipts.....(subtract line 18 from line 19) >	20,217.11	40,424.02	
<b>II. Disbursements</b>			
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.....	68.37	472.82	
c. Total Operating Expenditures.....(Add ai, aii, and b) >	68.37	472.82	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other PACs.....	9,150.00	38,200.00	
24. Independent Expenditures (see Schedule E).....	0.00	0.00	
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441a(eH)).....	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. Individual/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 a,b, and c) >	0.00	0.00	
29. Other Disbursements.....	-1,750.00	800.00	
30. Total Disbursements.....(Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	7,468.37	39,472.82	
31. Total Federal Disbursements.....(Subtract line 21 aii from line 30) >	7,468.37	39,472.82	
<b>III. Net Contributions/Operating Expenditures</b>			
32. Total Contributions (Other than loans)(from line 11d).....	19,460.80	39,048.80	
33. Total Contribution Refunds (from line 28d).....	0.00	0.00	
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	19,460.80	39,048.80	
35. Total Federal Operating Expenditures.....(add 21 ai and 21 b) >	68.37	472.82	
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00	
37. Net Operating Expenditures.....(subtract line 36 from 35) >	68.37	472.82	

C O U N T Y



**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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 Society of Travel Agents PAC

200301090100

A. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets Trust</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period  <b>606.31</b>
	Occupation	<b>12/31/95</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
		<b>1,225.22</b>	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
C. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional).....>	<b>606.31</b>
TOTAL this Period (Last page this line number only).....>	<b>606.31</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
 American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Riggs National Bank</b>	<b>Operating Expenses</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	<b>12/31/95</b>	<b>68.37</b>
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional)..... > **68.37**

TOTAL this Period (Last page this line number only)..... > **68.37**

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 4

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)  
 American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Friends of Senator D'Amato P.O. Box 3311 Mincola, NY 11501	Alfonse M. D'Amato, U.S. SENATE NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000	07/19/95	200.00
Toby Roth for Congress '96 Committee P.O. Box 2673 Appleton, WI 54913-9957	Toby Roth, U.S. HOUSE 8th WI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	500.00
Friends of Sonny Bono P.O. Box 16121 Alexandria, VA 22302	Sonny Bono, U.S. HOUSE 4th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	250.00
LoBlondo for Congress 1122 Fifth Street, NW Washington, DC 20001	Frank A. LoBlondo, U.S. HOUSE 2nd NJ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	200.00
Alaskans for Don Young 2300 Clarendon Blvd. Ste. 1010 Arlington, VA 22201	Don Young, U.S. HOUSE AL. AK Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	250.00
Bob Filner for Congress P.O. Box 127868 San Diego, CA 92112	Bob Filner, U.S. HOUSE 50th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	250.00
ARMPAC 1155 21st Street, NW Suite 300 Washington, DC 20036	Tom DeLay, U.S. HOUSE 22nd TX Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	07/19/95	500.00
Friends of Bob Livingston 4010 Franconia Road Alexandria, VA 22310-2136	Robert L. Livingston, U.S. HOUSE 1st LA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	250.00
Lazio for Congress 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021	Rick A. Lazio, U.S. HOUSE 2nd NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	200.00

SUB TOTAL of Disbursements this page (Optional) ..... > 2,600.00

TOTAL this Period (Last page this line number only) ..... >

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
 American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Hill Thomas Campaign Committee P.O. Box 23175 Washington, DC 20026	Hill Thomas, U.S. HOUSE 21st CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	250.00
B. Full Name, Mailing Address and Zip Code McConnell Senate Committee '96 P.O. Box 1496 Louisville, KY 40201	Mitch McConnell, U.S. SENATE KY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	500.00
C. Full Name, Mailing Address and Zip Code McCrery for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Jim McCrery, U.S. HOUSE 5th LA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	200.00
D. Full Name, Mailing Address and Zip Code Jay Kim for Congress 4451 Brookfield Corp Dr. Suite 200 Chantilly, VA 22021-1652	Jay C. Kim, U.S. HOUSE 41st CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	09/13/95	250.00
E. Full Name, Mailing Address and Zip Code Hyde for Congress Committee P.O. Box 332 Des Plaines, IL 60016	Henry J. Hyde, U.S. HOUSE 6th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	10/24/95	100.00
F. Full Name, Mailing Address and Zip Code Hyde for Congress Committee P.O. Box 332 Des Plaines, IL 60016	Henry J. Hyde, U.S. HOUSE 6th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	10/24/95	100.00
G. Full Name, Mailing Address and Zip Code Bartlett for Congress P.O. Box 3662 Frederick, MD 21705	Roscoe G. Bartlett, U.S. HOUSE 6th MD Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00
H. Full Name, Mailing Address and Zip Code Chenoweth for Congress c/o 2105 Mt. Vernon Ave. Suite 2 Alexandria, VA 22301	Helen Chenoweth, U.S. HOUSE 1st MD Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00
I. Full Name, Mailing Address and Zip Code Fox for Congress c/o 3001 Park Center Dr. Suite 1105 Alexandria, VA 22302	Jon D. Fox, U.S. HOUSE 13th PA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00

SUB TOTAL of Disbursements this page (Optional)..... > 2,000.00

TOTAL this Period (Last page this line number only)..... >

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
**American Society of Travel Agents PAC**

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A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Watts for Congress</b> 3221 Woodland Drive, NW Washington, DC 20008	<b>J.C. Watts, U.S. HOUSE 4th OK</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	250.00
<b>Peterson for Congress</b> 311 6th Street, SE #2 Washington, DC 20003	<b>Collin C. Peterson, U.S. HOUSE 7th MN</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00
<b>McIntosh for Congress</b> 2418 Davis Avenue Alexandria, VA 22302	<b>David M. McIntosh, U.S. HOUSE 2nd IN</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00
<b>Duncan for Congress</b> 6436 Scribner Court Friendship, MD 20758	<b>John J. "Jimmy" Duncan, U.S. HOUSE 2nd TN</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	250.00
<b>Friends of Larry Pressler</b> P.O. Box 2827 Washington, DC 20013	<b>Larry Pressler, U.S. SENATE SD</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	500.00
<b>Friends of Jim Oberstar</b> P.O. Box 465 Duluth, MN 55801	<b>James L. Oberstar, U.S. HOUSE 8th MN</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	500.00
<b>Pete King for Congress Committee</b> 4431 Westover Place, NW Washington, DC 20016	<b>Peter T. King, U.S. HOUSE 3rd NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	250.00
<b>Minge for Congress</b> P.O. Box 71 Granite Falls, MN 56241	<b>David Minge, U.S. HOUSE 2nd MN</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	200.00
<b>Friends of Sherwood Boehlert</b> 1212 North Vernon Street Arlington, VA 22201	<b>Sherwood Boehlert, U.S. HOUSE 23rd NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1996	11/29/95	300.00

SUB TOTAL of Disbursements this page (Optional)..... >	2,650.00
TOTAL this Period (Last page this line number only)..... >	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Bob Filner for Congress</b> P.O. Box 127868 San Diego, CA 92112	<b>Bob Filner, U.S. HOUSE 50th CA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Cubin for Congress</b> 4451 Brookfield Corp Dr. Suite 200 Chantilly, VA 22021-1652	<b>Barbara Cubin, U.S. HOUSE AL WY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Friends for Houghton</b> 4451 Brookfield Corp Dr. Suite 200 Chantilly, VA 22021-1652	<b>Arno Houghton, U.S. HOUSE 31st NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Friends of Mike Forbes for Congress</b> P.O. Box 505 Farmingville, NY 11738	<b>Michael P. Forbes, U.S. HOUSE 1st NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Committee to Re-Elect Congressman Duncan Hunter</b> 9340 Fuerte Drive Suite 302 La Mesa, CA 91941-4164	<b>Duncan Hunter, U.S. HOUSE 52nd CA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Martin Frost Campaign Committee</b> P.O. Box 75214 Washington, DC 20013-5214	<b>Martin Frost, U.S. HOUSE 24th TX</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	200.00
<b>Friends of John Warner '96 Committee</b> 425 Second Street, NE Washington, DC 20002	<b>John W. Warner, 1st VA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	11/29/95	400.00
<b>Friends of Jane Harman</b> 5200 W. Century Blvd. Suite 370 Los Angeles, CA 90045	<b>Jane Harman, 36th CA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	12/12/95	500.00
<b>Moorhead for Congress</b> 4451 Brookfield Corp Dr Ste. 200 Chantilly, VA 22021-1651	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify): 1996	12/12/95	-200.00

SUB TOTAL of Disbursements this page (Optional)..... >	1,900.00
TOTAL this Period (Last page this line number only)..... >	9,150.00

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)  
**American Society of Travel Agents PAC**

9503019109

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Alpert for Assembly</b> P.O. Box 84324 San Diego, CA 92138	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify: <b>1996</b> )	<b>11/29/95</b>	<b>-750.00</b>
<b>Friends of Assemblywoman Jackie Speier</b> P.O. Box 3114 Dale City, CA 94015-0113	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify: <b>1996</b> )	<b>11/29/95</b>	<b>-1,000.00</b>
<b>Joe Baca for Assembly</b> 801 12th Street, Ste. 600 Sacramento, CA 95814	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify: <b>1996</b> )	<b>11/29/95</b>	<b>-500.00</b>
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify):	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	<b>-2,250.00</b>
TOTAL this Period (Last page this line number only).....>	<b>-2,250.00</b>

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*JEG*  
 PREPARER

1-29-96  
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9503090110