PAGE 1 / 4

STATEMENT OF **FEC ORGANIZATION** FORM 1 Office Use Only NAME OF (Check if name Example: If typing, type 12FE4M5 COMMITTEE (in full) over the lines. is changed) AMERICAN SOCIETY OF TRAVEL AGENTS PAC 675 North Washington Street ADDRESS (number and street) Suite 490 (Check if address is changed) Alexandria 22314 VACITY A STATE A ZIP CODE A COMMITTEE'S E-MAIL ADDRESS epeck@asta.org (Check if address is changed) Optional Second E-Mail Address COMMITTEE'S WEB PAGE ADDRESS (URL) (Check if address is changed) DATE 08 2016 C00114108 FEC IDENTIFICATION NUMBER 3. X 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. Eben Peck Type or Print Name of Treasurer Eben Peck [Electronically Filed] 04 08 2016 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g. ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS. Office For further information contact: FEC FORM 1 Federal Election Commission Use (Revised 06/2012) Toll Free 800-424-9530 Only

Local 202-694-1100

FFC F	orm 1 (Revised 02/2009)	Page 2
	COMMITTEE	i aye £
Candidat	e Committee:	
(a)	This committee is a principal campaign committee. (Complete the candidate information below	1.)
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Corinformation below.)	mplete the candidate
Name of Candidate		
Candidate Party Affilia	tion Office Sought: House Senate President	State
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.	
Name of Candidate		
Party Co		_
(d)	This committee is a (National, State or subordinate) committee of the	(Democratic, Republican, etc.) Party.
Political A	Action Committee (PAC):	
(e) X	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its co	nnected organization is a
	Corporation Corporation w/o Capital Stock	Labor Organization
	Membership Organization X Trade Association	Cooperative
	In addition, this committee is a Lobbyist/Registrant PAC.	
(f)	This committee supports/opposes more than one Federal candidate, and is NOT a separate scommittee. (i.e., nonconnected committee)	segregated fund or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
Joint Fun	draising Representative:	
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for committees/organizations, at least one of which is an authorized committee of a federal candidate	
(h)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for t committees/organizations, none of which is an authorized committee of a federal candidate.	wo or more political
Cor	nmittees Participating in Joint Fundraiser	
1.	FEC ID number	
2.	FEC ID number	
3.	FEC ID number	
4.		

FEC Form 1 (Revised	02/2009)	Page 3
Write or Type Committee Nam	ie	-
AMERICAN SC	OCIETY OF TRAVEL AGENTS PA	C
6. Name of Any Connected	Organization, Affiliated Committee, Joint Fundraising Representation	tive, or Leadership PAC Sponsor
American Society of T	ravel Agents	
Mailing Address	675 N Washington St.	
Walling Address	Suite 490	
	Alexandria	22314
	CITY STAT	E ZIP CODE
	SIAI	211 0002
Relationship: X Connected	ed Organization Affiliated Committee Joint Fundraising Repres	sentative Leadership PAC Sponsor
books and records. Eben Pec Full Name Mailing Address	675 N Washington St. Suite 490 Alexandria	22314
Title or Position	CITY STATE	ZIP CODE
SVP, Government Aff.	Telephone number	703 - 739 - 6842
8. Treasurer: List the name ar any designated agent (e.g.,	nd address (phone number optional) of the treasurer of the commi assistant treasurer).	ttee; and the name and address of
Full Name Eben Pec	k	
Mailing Address	675 N Washington	
	Alexandria	
Title or Position	CITY STATE	ZIP CODE

Telephone number

	m 1 (Revised 02/2009)	Page 4
Full Name of Designated	Erika Richter	1
Agent		
Mailing Address	675 N Washington St.	
	Suite 490	
	Alexandria VA 2231	4
	CITY STATE	ZIP CODE
Title or Position Manager, Gvt A		739 - 6806
	PNC Bank- Corcoran	nolds accounts, rents
Mailing Address	1503 Pennsylvania Avenue, NW	
Mailing Address	1503 Pennsylvania Avenue, NW	
Mailing Address	Mashington DC 2000)5
Mailing Address		D5
Mailing Address Name of Bank,	Washington DC 2000 CITY STATE	
	Washington DC 2000 CITY STATE	
	Washington CITY STATE Depository, etc.	
Name of Bank,	Washington CITY STATE Depository, etc.	
Name of Bank,	Washington CITY STATE Depository, etc.	