

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

ADDRESS (number and street) 675 NORTH WASHINGTON STREET

▼ SUITE 490

Check if different than previously reported. (ACC) ALEXANDRIA VA 22314 -

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲

C C00114108 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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

<input type="checkbox"/> Feb 20 (M2)	<input type="checkbox"/> May 20 (M5)	<input type="checkbox"/> Aug 20 (M8)	<input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only)
<input type="checkbox"/> Mar 20 (M3)	<input type="checkbox"/> Jun 20 (M6)	<input type="checkbox"/> Sep 20 (M9)	<input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only)
<input type="checkbox"/> Apr 20 (M4)	<input type="checkbox"/> Jul 20 (M7)	<input type="checkbox"/> Oct 20 (M10)	<input type="checkbox"/> Jan 31 (YE)

(c) 12-Day Primary (12P) General (12G) Runoff (12R)

PRE-Election Report for the: Convention (12C) Special (12S)

Election on / / in the State of

(d) 30-Day General (30G) Runoff (30R) Special (30S)

POST-Election Report for the: / / in the State of

5. Covering Period / / 2022 through / / 2022

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

Type or Print Name of Treasurer

Signature of Treasurer Peck, Eben, , , [Electronically Filed] Date / / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office Use Only							
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FEC FORM 3X
Rev. 05/2016

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2022"/>	<input type="text" value="378490.34"/>	<input type="text" value="378490.34"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="378490.34"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="5182.06"/>	<input type="text" value="5182.06"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="383672.40"/>	<input type="text" value="383672.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="32933.99"/>	<input type="text" value="32933.99"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="350738.41"/>	<input type="text" value="350738.41"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Report Covering the Period: From: / / To: / /

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).....	4894.96	4894.96
(ii) Unitemized	5109.62	5109.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10004.58	10004.58
(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)	10004.58	10004.58
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.).....	- 4822.52	- 4822.52
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 Transfers (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)).....▶	5182.06	5182.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5182.06	5182.06

DETAILED SUMMARY PAGE of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	433.99	433.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	433.99	433.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	26500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	6000.00	6000.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	32933.99	32933.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32933.99	32933.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	10004.58	10004.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10004.58	10004.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	433.99	433.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	433.99	433.99

**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 OF 21
<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

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 ADVISORS, INC. PAC

A. Ardis, Rick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 229 Paterson Avenue
 Suite 1
 City East Rutherford State NJ Zip Code 07073
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) General Manger
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 01 / 27 / 2022
Transaction ID : SA11AI.12051
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6565 N. MacArthur Blvd
 Suite 400
 City Irving State TX Zip Code 75039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 417.00

Date of Receipt
 01 / 09 / 2022
Transaction ID : SA11AI.12029
 Amount of Each Receipt this Period
 417.00
 Memo Item

C. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6565 N. MacArthur Blvd
 Suite 400
 City Irving State TX Zip Code 75039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President
 Receipt For: 2022
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 834.00

Date of Receipt
 02 / 09 / 2022
Transaction ID : SA11AI.12068
 Amount of Each Receipt this Period
 417.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1334.00
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 OF 21
	<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 6565 N. MacArthur Blvd
 Suite 400
 City Irving State TX Zip Code 75039
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 1251.00

Date of Receipt
 03 / 09 / 2022
Transaction ID : SA11AI.12157
 Amount of Each Receipt this Period
 417.00
 Memo Item

B. Green, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 816 Cinnaminson Ave
 City Palmyra State NJ Zip Code 08065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mayfair Travel Occupation (for Individual) Vice President
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 256.41

Date of Receipt
 03 / 21 / 2022
Transaction ID : SA11AI.12172
 Amount of Each Receipt this Period
 256.41
 Memo Item

C. Hale, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 01 / 19 / 2022
Transaction ID : SA11AI.12039
 Amount of Each Receipt this Period
 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	898.41
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 8 OF 21
<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Hale, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

Name of Employer (for Individual) Travel N Relax	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		19		2022

Transaction ID : SA11AI.12084

Amount of Each Receipt this Period
225.00

Memo Item

B. Hale, Lisa, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

Name of Employer (for Individual) Travel N Relax	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2022

Transaction ID : SA11AI.12167

Amount of Each Receipt this Period
225.00

Memo Item

C. Hale, Robert, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

Name of Employer (for Individual) Travel N Relax	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		29		2022

Transaction ID : SA11AI.12061

Amount of Each Receipt this Period
225.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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 9 OF 21
<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Hale, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

Name of Employer (for Individual) Travel N Relax	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : SA11AI.12096

Amount of Each Receipt this Period
 225.00

Memo Item

B. Hale, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

Name of Employer (for Individual) Travel N Relax	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2022
Transaction ID : SA11AI.12184

Amount of Each Receipt this Period
 225.00

Memo Item

C. Kimi, Ken, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1654 Onipaa Street

City Honolulu	State HI	Zip Code 96819
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A Touch Above Travel Services	Occupation (for Individual) Travel Advisor
--	---

Receipt For: 2022
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 11 / 2022
Transaction ID : SA11AI.12070

Amount of Each Receipt this Period
 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.00
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 10 OF 21
<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Lee, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 Erie Ct
 City Winter Springs State FL Zip Code 32708-5513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 03 / 26 / 2022
Transaction ID : SA11AI.12181
 Amount of Each Receipt this Period 100.00
 Memo Item

B. Meader, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1533 Independence Avenue SE
 City Washington State DC Zip Code 20003-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Amer. Soc. of Travel Advisors Occupation (for Individual) SVP Industry Affairs
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt 03 / 23 / 2022
Transaction ID : SA11AI.12174
 Amount of Each Receipt this Period 85.00
 Memo Item

C. Paugh, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 US Hwy 1 Ste 6
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All About You Travel Unlimted Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 02 / 24 / 2022
Transaction ID : SA11AI.12090
 Amount of Each Receipt this Period 102.56
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	287.56
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 OF 21
<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Paugh, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 US Hwy 1 Ste 6
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All About You Travel Unlimited Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 03 / 24 / 2022
Transaction ID : SA11AI.12179
 Amount of Each Receipt this Period 102.56
 Memo Item

B. Phillips, Shelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11929 Hearthstone Lane
 City Birmingham State AL Zip Code 35111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel by That Girl Occupation (for Individual) Independent Agent
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.91

Date of Receipt 02 / 15 / 2022
Transaction ID : SA11AI.12079
 Amount of Each Receipt this Period 128.20
 Memo Item

C. Sinclair, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 US Hwy 46
 City Hackettstown State NJ Zip Code 07840-2733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skyland World Travel Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt 01 / 26 / 2022
Transaction ID : SA11AI.12049
 Amount of Each Receipt this Period 512.82
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	743.58
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 12 OF 21
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Takushi, Katherine, , ,

Mailing Address PO Box 1204

City Haiku	State HI	Zip Code 96708
---------------	-------------	-------------------

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

Name of Employer (for Individual) Captivating Journeys	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.41

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 02 / 05 / 2022

Transaction ID : SA11AI.12065

Amount of Each Receipt this Period
256.41

Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	256.41
TOTAL This Period (last page this line number only).....▶	4894.96

**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 OF 21
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. PNC Bank NA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8800 Tincum Blvd.

City Philidelphia	State PA	Zip Code 19153
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 4822.53

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2022

Transaction ID : SA17.12362

Amount of Each Receipt this Period
- 4822.53

Memo Item
Interest Income

B. PNC Bank NA
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address 8800 Tincum Blvd.

City Philidelphia	State PA	Zip Code 19153
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 4822.52

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		31		2022

Transaction ID : SA17.12369

Amount of Each Receipt this Period
0.01

Memo Item
Cash on Hand Blancing Entry due to Internal Audit

C.
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	- 4822.52
TOTAL This Period (last page this line number only).....	- 4822.52

**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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. PNC Bank NA

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2022

FEC Identification Number

C
Transaction ID : SB21B.12196
Amount of Each Disbursement this Period
85.33

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank NA

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
02 / 28 / 2022

FEC Identification Number

C
Transaction ID : SB21B.12197
Amount of Each Disbursement this Period
72.23

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank NA

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2022

FEC Identification Number

C
Transaction ID : SB21B.12198
Amount of Each Disbursement this Period
82.73

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

240.29
240.29

**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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. AMODEI FOR NEVADA

Full Name (Last, First, Middle Initial)
Mailing Address 503 N DIVISION ST

City CARSON CITY State NV Zip Code 89703

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
AMODEI, MARK EUGENE, , ,

Office Sought: House Senate President
State: NV District: 02

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 04 / 2022

FEC Identification Number: C00496760
Transaction ID : SB23.12202
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. CASE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 2941

City HONOLULU State HI Zip Code 96802

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
CASE, EDWARD, , ,

Office Sought: House Senate President
State: HI District: 01

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement: 03 / 29 / 2022

FEC Identification Number: C00680918
Transaction ID : SB23.12361
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. FRIENDS OF JOHN THUNE

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
THUNE, JOHN R., , ,

Office Sought: House Senate President
State: SD District: 00

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 04 / 2022

FEC Identification Number: C00409581
Transaction ID : SB23.12201
Amount of Each Disbursement this Period: 1500.00

Memo Item

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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. FRIENDS OF JOHN THUNE

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/
Type

Candidate Name
THUNE, JOHN R., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: SD District: 00

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2022

FEC Identification Number

C C00409581

Transaction ID : SB23.12214

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JIMMY PANETTA FOR CONGRESS

Mailing Address PO BOX 103

City CARMEL VALLEY State CA Zip Code 93924

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/
Type

Candidate Name
PANETTA, JIMMY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement

MM / DD / YYYY
01 / 24 / 2022

FEC Identification Number

C C00592154

Transaction ID : SB23.12199

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LAHOOD FOR CONGRESS

Mailing Address P.O. BOX 10735

City PEORIA State IL Zip Code 61612

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/
Type

Candidate Name
LAHOOD, DARIN MCKAY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IL District: 16

Date of Disbursement

MM / DD / YYYY
02 / 01 / 2022

FEC Identification Number

C C00575050

Transaction ID : SB23.12217

Amount of Each Disbursement this Period

1500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

4000.00

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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial) A. LISA MURKOWSKI FOR US SENATE		Date of Disbursement MM / DD / YYYY 02 / 04 / 2022
Mailing Address PO BOX 100847		FEC Identification Number C00384529 Transaction ID : SB23.12200 Amount of Each Disbursement this Period 1500.00
City ANCHORAGE	State AK	Zip Code 99510
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name MURKOWSKI, LISA, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK	District: 00	

Full Name (Last, First, Middle Initial) B. LISA MURKOWSKI FOR US SENATE		Date of Disbursement MM / DD / YYYY 03 / 02 / 2022
Mailing Address PO BOX 100847		FEC Identification Number C00384529 Transaction ID : SB23.12210 Amount of Each Disbursement this Period 1000.00
City ANCHORAGE	State AK	Zip Code 99510
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name MURKOWSKI, LISA, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK	District: 00	

Full Name (Last, First, Middle Initial) C. LISA MURKOWSKI FOR US SENATE		Date of Disbursement MM / DD / YYYY 03 / 02 / 2022
Mailing Address PO BOX 100847		FEC Identification Number C00384529 Transaction ID : SB23.12365 Amount of Each Disbursement this Period 500.00
City ANCHORAGE	State AK	Zip Code 99510
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name MURKOWSKI, LISA, , ,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AK	District: 00	

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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. MAGGIE FOR NH

Full Name (Last, First, Middle Initial)
Maggie For NH

Mailing Address PO BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
HASSAN, MARGARET WOOD, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: NH District: 00

Date of Disbursement: 03 / 02 / 2022

FEC Identification Number: C 000588772
Transaction ID : SB23.12211
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. MARSHA FOR SENATE

Full Name (Last, First, Middle Initial)
Marsha For Senate

Mailing Address PO BOX 3750

City BRENTWOOD State TN Zip Code 37024

Purpose of Disbursement
Contribution for Candidate Committee

Candidate Name
BLACKBURN, MARSHA MRS., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: TN District: 00

Date of Disbursement: 03 / 17 / 2022

FEC Identification Number: C 000376939
Transaction ID : SB23.12220
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MORAN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
Moran Victory Committee

Mailing Address PO BOX 541

City BELLEVILLE State KS Zip Code 66935

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
MORAN, JERRY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: KS District: 00

Date of Disbursement: 02 / 04 / 2022

FEC Identification Number: C S0KS00091
Transaction ID : SB23.12205
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶

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

3000.00

**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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. NEW DEMOCRAT COALITION ACTION FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		09		2022

Mailing Address 233 PENNSYLVANIA AVE SE

FEC Identification Number

C C00409730

Transaction ID : SB23.12216

Amount of Each Disbursement this Period

5000.00

Memo Item

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution to Political Action Committee

011
Category/
Type

Candidate Name

NEW DEMOCRAT COALITION ACTION FUND

Office Sought: House Senate President
 Disbursement For: 2022
 Primary General
 Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

B. NUTMEG PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		08		2022

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST

FEC Identification Number

C C00492983

Transaction ID : SB23.12024

Amount of Each Disbursement this Period

1000.00

Memo Item

City STAMFORD State CT Zip Code 06901

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/
Type

Candidate Name

NUTMEG PAC

Office Sought: House Senate President
 Disbursement For: 2022
 Primary General
 Other (specify) ▼
 State: District:

Full Name (Last, First, Middle Initial)

C. SALAZAR FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		29		2022

Mailing Address 3725 WEST FLAGLER STREET
#281

FEC Identification Number

C C00714261

Transaction ID : SB23.12353

Amount of Each Disbursement this Period

500.00

Memo Item

City MIAMI State FL Zip Code 33134

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/
Type

Candidate Name

SALAZAR, MARIA ELVIRA, , ,

Office Sought: House Senate President
 Disbursement For: 2022
 Primary General
 Other (specify) ▼
 State: FL District: 27

SUBTOTAL of Disbursements This Page (optional)..... ▶

6500.00

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"/> 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 SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. SMART SOLUTIONS PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2022

Mailing Address 611 PENNSYLVANIA AVE SE
UNIT 143

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/ Type

FEC Identification Number

C C00654475

Transaction ID : SB23.12351

Amount of Each Disbursement this Period

2500.00

Memo Item

Candidate Name

SMART SOLUTIONS PAC

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. TIM SCOTT FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	16	/	2022

Mailing Address 1405 ASHLEY RIVER RD

City CHARLESTON State SC Zip Code 29407

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/ Type

FEC Identification Number

C C00540302

Transaction ID : SB23.12206

Amount of Each Disbursement this Period

1500.00

Memo Item

Candidate Name

SCOTT, TIMOTHY E., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: SC District: 00

Full Name (Last, First, Middle Initial)

C. VICTORIA SPARTZ FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	29	/	2022

Mailing Address PO BOX 505

City NOBLESVILLE State IN Zip Code 46061

Purpose of Disbursement
Contribution to Candidate Committee

011
Category/ Type

FEC Identification Number

C C00737767

Transaction ID : SB23.12357

Amount of Each Disbursement this Period

2500.00

Memo Item

Candidate Name

SPARTZ, VICTORIA, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: IN District: 05

SUBTOTAL of Disbursements This Page (optional).....▶

6500.00

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

26500.00

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

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

A. Friends of Jay Ellenby

Full Name (Last, First, Middle Initial)
Mailing Address 126 S. Main Street
Lower Level

City Bel Air State MD Zip Code 21014

Purpose of Disbursement Nonfederal contribution

Candidate Name Ellenby, Jay, , ,

Office Sought: House Senate President
State: District:

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement: 02 / 22 / 2022

FEC Identification Number: C
Transaction ID : SB29.12234
Amount of Each Disbursement this Period: 6000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify)

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General
 Other (specify) ▼

Date of Disbursement: / /

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	6000.00
TOTAL This Period (last page this line number only).....▶	6000.00