

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 AGENTS PAC

ADDRESS (number and street) **675 North Washington Street**
Suite 490
Alexandria VA 22314
 Check if different than previously reported. (ACC)

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:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on [MM] / [DD] / [YYYY] in the State of []
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on [MM] / [DD] / [YYYY] in the State of []

5. Covering Period [MM] / [DD] / [YYYY] through [MM] / [DD] / [YYYY]
07 / 01 / 2017 through 12 / 31 / 2017

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, , Mr. ,
Type or Print Name of Treasurer

Signature of Treasurer *Peck, Eben, , Mr. ,* [Electronically Filed] Date **01 / 31 / 2018**

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL AGENTS 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="2017"/>		<input type="text" value="243673.45"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="252210.09"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="42378.02"/>	<input type="text" value="110289.92"/>
(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="294588.11"/>	<input type="text" value="353963.37"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="20273.88"/>	<input type="text" value="79649.14"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="274314.23"/>	<input type="text" value="274314.23"/>
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 AGENTS 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).....	35212.00	78409.00
(ii) Unitemized	6996.00	21617.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	42208.00	100086.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	42208.00	110086.00
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.).....	170.02	203.92
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)).....▶	42378.02	110289.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	42378.02	110289.92

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	4273.88	16649.14
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	4273.88	16649.14
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	16000.00	63000.00
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).....	0.00	0.00
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)) ..	20273.88	79649.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	20273.88	79649.14

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)	42208.00	110086.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	42208.00	110086.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	4273.88	16649.14
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4273.88	16649.14

**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 31
<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 AGENTS PAC

A. Ardis, Ricky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Mozart St
 Apt 7
 City East Rutherford State NJ Zip Code 07073-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) Travel Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 28 / 2017
Transaction ID : C3657775
 Amount of Each Receipt this Period 30.00
 Memo Item

B. Ardis, Ricky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Mozart St
 Apt 7
 City East Rutherford State NJ Zip Code 07073-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) Travel Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 07 / 29 / 2017
Transaction ID : C3565276
 Amount of Each Receipt this Period 220.00
 Memo Item

C. Block, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 730 Brookstone Ct
 City Alpharetta State GA Zip Code 30009-6831
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Leaders Network Occupation (for Individual) President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 18 / 2017
Transaction ID : C3589446
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 31
<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 AGENTS PAC

A. Bursch, Frederic, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 803 Saint Patrick St
 City Rapid City State SD Zip Code 57701-5305
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Bursch Travel Agency, INC Occupation (for Individual) Owner/CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **12 / 19 / 2017**
Transaction ID : C3641027
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Cameron, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5588 S Green St
 City Salt Lake City State UT Zip Code 84123-6964
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Christopherson Business Travel Occupation (for Individual) COO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **09 / 20 / 2017**
Transaction ID : C3592758
 Amount of Each Receipt this Period 1000.00
 Memo Item

C. Chapin, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 N Michigan Ave Apt 3604
 City Chicago State IL Zip Code 60611-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ensemble Occupation (for Individual) Travel Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt **08 / 29 / 2017**
Transaction ID : C3580408
 Amount of Each Receipt this Period 25.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1275.00
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 8 OF 31
	<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 AGENTS PAC

A. Cheney Bunker, Cheryl, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 12149 Crescent Cove Ct
 City Windermere State FL Zip Code 34786-7700
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Virtuos Occupation (for Individual) Vice President, Global Member Partner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4200.00

Date of Receipt 08 / 09 / 2017
Transaction ID : C3570001
 Amount of Each Receipt this Period 4200.00
 Memo Item

B. Daly, Drew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 516 NE 7th Ave # 2
 City Fort Lauderdale State FL Zip Code 33301-1204
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) WTH Occupation (for Individual) General Manager
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 07 / 05 / 2017
Transaction ID : C3550166
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt 07 / 21 / 2017
Transaction ID : C3658053
 Amount of Each Receipt this Period 417.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4867.00
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 31
<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 AGENTS PAC

A. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt 08 / 21 / 2017
Transaction ID : C3658054
 Amount of Each Receipt this Period 417.00
 Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2014 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt 09 / 21 / 2017
Transaction ID : C3661525
 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 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2014 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt 10 / 23 / 2017
Transaction ID : C3661526
 Amount of Each Receipt this Period 417.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1251.00
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 31
	<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 AGENTS PAC

A. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2017
Transaction ID : C3661527
 Amount of Each Receipt this Period
 417.00
 Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 4587.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 21 / 2017
Transaction ID : C3661528
 Amount of Each Receipt this Period
 417.00
 Memo Item

C. Hale, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 Stratford Pl
 City Vestavia Hls State AL Zip Code 35242-2508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADTRAV Occupation (for Individual) CEO
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 20 / 2017
Transaction ID : C3559441
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5834.00
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 11 OF 31
<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 AGENTS PAC

A. Held, Ernie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4170 Marine Dr 23L
 City Chicago State IL Zip Code 60613
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Held Travel Bureau, Inc. Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 07 / 2017
Transaction ID : C3658040
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Irwin, Pamela, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3674 S Bentley Ave
 City Los Angeles State CA Zip Code 90034-6902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Self - ATB Occupation (for Individual) Travel Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 3600.00

Date of Receipt 07 / 06 / 2017
Transaction ID : C3550658
 Amount of Each Receipt this Period 3600.00
 Memo Item

C. lavadero, ernesto, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1595 Lexington Ave Apt 6E
 City New York State NY Zip Code 10029-6343
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Express Travel Occupation (for Individual) Director
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 09 / 20 / 2017
Transaction ID : C3592320
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4600.00
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 12 OF 31
	<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 AGENTS PAC

A. Lee, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9880 Kaiser Ave NE
 City Monticello State MN Zip Code 55362-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Quest Occupation (for Individual) CFO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 08 / 14 / 2017
Transaction ID : C3575219
 Amount of Each Receipt this Period 500.00
 Memo Item

B. Lewis, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7208 Falls of Neuse Rd Ste 220
 City Raleigh State NC Zip Code 27615-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 07 / 19 / 2017
Transaction ID : C3542013
 Amount of Each Receipt this Period 250.00
 Memo Item

C. Lewis, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7208 Falls of Neuse Rd Ste 220
 City Raleigh State NC Zip Code 27615-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 08 / 19 / 2017
Transaction ID : C3657763
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
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 13 OF 31
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

A. Lewis, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7208 Falls of Neuse Rd
Ste 220

City Raleigh State NC Zip Code 27615-3244

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

Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 09 / 19 / 2017

Transaction ID : C3657764

Amount of Each Receipt this Period 250.00

Memo Item

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

Mailing Address 7208 Falls of Neuse Rd
Ste 220

City Raleigh State NC Zip Code 27615-3244

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

Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 10 / 20 / 2017

Transaction ID : C3657765

Amount of Each Receipt this Period 250.00

Memo Item

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

Mailing Address 7208 Falls of Neuse Rd
Ste 220

City Raleigh State NC Zip Code 27615-3244

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

Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO

Receipt For: Primary General Other (specify)

Aggregate Year-to-Date ▼ 2250.00

Date of Receipt 11 / 21 / 2017

Transaction ID : C3657766

Amount of Each Receipt this Period 250.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	750.00
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 14 OF 31
<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 AGENTS PAC

A. Lewis, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7208 Falls of Neuse Rd
 Ste 220
 City Raleigh State NC Zip Code 27615-3244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Management Partners, Inc. Occupation (for Individual) President & CEO
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2250.00

Date of Receipt **12 / 21 / 2017**
Transaction ID : C3657768
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Lobasso, Peter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St,
 Ste 490
 City Alexandria State VA Zip Code 22314
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society of Travel Agents Occupation (for Individual) LAWyer
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 275.00

Date of Receipt **09 / 01 / 2017**
Transaction ID : C3658057
 Amount of Each Receipt this Period 25.00
 Memo Item

C. Mahtani, Sunil, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 71 5th Ave
 City New York State NY Zip Code 10003-3004
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ovation Travel Group, Inc Occupation (for Individual) EVP/CFO
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **08 / 24 / 2017**
Transaction ID : C3579106
 Amount of Each Receipt this Period 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	2275.00
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 15 OF 31
	<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 AGENTS PAC

A. Moebes, anne marie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3038 Westham Dr
 City Saint Louis State MO Zip Code 63131-2537
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Market Report Occupation (for Individual) Publisher
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt **09 / 06 / 2017**
Transaction ID : C3585463
 Amount of Each Receipt this Period 250.00
 Memo Item

B. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt **07 / 13 / 2017**
Transaction ID : C3552231
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt **07 / 28 / 2017**
Transaction ID : C3565206
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	350.00
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 16 OF 31
<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 AGENTS PAC

A. Peck, Eben, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
08 / 07 / 2017

Transaction ID : C3660514

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
08 / 13 / 2017

Transaction ID : C3575175

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
09 / 01 / 2017

Transaction ID : C3658059

Amount of Each Receipt this Period
25.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	125.00
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 17 OF 31
	<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 AGENTS PAC

A. Peck, Eben, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
09 / 05 / 2017

Transaction ID : C3661520

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
09 / 13 / 2017

Transaction ID : C3587925

Amount of Each Receipt this Period
50.00

Memo Item

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

Mailing Address 675 N Washington St
Ste 490

City Alexandria State VA Zip Code 22314-1940

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

Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs

Receipt For: 2014
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1145.00

Date of Receipt
MM / DD / YYYY
10 / 05 / 2017

Transaction ID : C3661521

Amount of Each Receipt this Period
50.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 18 OF 31
	<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 AGENTS PAC

A. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt **10 / 13 / 2017**
Transaction ID : C3604162
 Amount of Each Receipt this Period 50.00
 Memo Item

B. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2014 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt **11 / 06 / 2017**
Transaction ID : C3661547
 Amount of Each Receipt this Period 50.00
 Memo Item

C. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt **11 / 13 / 2017**
Transaction ID : C3617949
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	150.00
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 19 OF 31
	<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 AGENTS PAC

A. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 05 / 2017
Transaction ID : C3661548
 Amount of Each Receipt this Period
 50.00
 Memo Item

B. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) American Society Of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1145.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 13 / 2017
Transaction ID : C3636812
 Amount of Each Receipt this Period
 50.00
 Memo Item

C. Reader, Eric, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2440 Virginia Ave NW
 City Washington State DC Zip Code 20037-2601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Connoisseur Travel, Ltd. Occupation (for Individual) Travel Agency Owner
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 17 / 2017
Transaction ID : C3558276
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	600.00
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 20 OF 31
	<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 AGENTS PAC

A. rice, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 200 Riverside Dr
Apt 9A

City New York State NY Zip Code 10025-7246

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

Name of Employer (for Individual) Ensemble Travel Group Occupation (for Individual) Co-President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 24 / 2017

Transaction ID : C3562523

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 12535 State Highway 27

City Sparta State WI Zip Code 54656-4763

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

Name of Employer (for Individual) ADTRAV Travel Management Occupation (for Individual) Director

Receipt For:
 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
 08 / 18 / 2017

Transaction ID : C3578031

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 334 Ponderosa Ln

City Lima State OH Zip Code 45805-3964

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

Name of Employer (for Individual) Travel Concepts Occupation (for Individual) Travel Designer

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
235.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 16 / 2017

Transaction ID : C3576135

Amount of Each Receipt this Period
235.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1485.00
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 21 OF 31
	<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 AGENTS PAC

A. Seifert, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 8663 E Tuckey Ln
 City Scottsdale State AZ Zip Code 85250-4939
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Welcome Aboard Vacation Center Inc Travel Consultant
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 08 / 01 / 2017
Transaction ID : C3566025
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Smith, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2330 Mall Loop Rd
 City Lancaster State CA Zip Code 93536-7257
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 ATB Travel President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 08 / 10 / 2017
Transaction ID : C3572645
 Amount of Each Receipt this Period
 500.00
 Memo Item

C. Strong, James, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3 Bretton Creek Ct
 City Dallas State TX Zip Code 75220-3842
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Strong Travel President
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 12 / 19 / 2017
Transaction ID : C3640860
 Amount of Each Receipt this Period
 1000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1750.00
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 22 OF 31
	<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 AGENTS PAC

A. Upchurch, Matthew, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 505 Main Street
Suite 500

City Fort Worth State TX Zip Code 76102

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

Name of Employer (for Individual) Virtuoso Occupation (for Individual) President & CEO

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 31 / 2017

Transaction ID : C3657761

Amount of Each Receipt this Period
5000.00

Memo Item

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

Mailing Address 3927 Lux Ct

City San Jose State CA Zip Code 95136-1954

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

Name of Employer (for Individual) Willow Glen Travel Occupation (for Individual) owner/travel agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 03 / 2017

Transaction ID : C3568252

Amount of Each Receipt this Period
3000.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8000.00
TOTAL This Period (last page this line number only).....	35212.00

**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 23 OF 31
<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 AGENTS PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PNC Bank NA

Mailing Address 8800 Tinicum Blvd.

City Philadelphia	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 ▼
203.92

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2017

Transaction ID : C3658273

Amount of Each Receipt this Period
170.02

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 M	/	D 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 M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	170.02
TOTAL This Period (last page this line number only).....▶	170.02

**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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. PNC Bank NA		Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [] Transaction ID : D182200 Amount of Each Disbursement this Period [] 1602.81	
City Philadelphia	State PA	Zip Code 19153	Category/Type []
Purpose of Disbursement Credit Card processing fees			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. PNC Bank NA		Date of Disbursement MM / DD / YYYY 07 / 01 / 2017	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [] Transaction ID : D182201 Amount of Each Disbursement this Period [] 163.60	
City Philadelphia	State PA	Zip Code 19153	Category/Type []
Purpose of Disbursement Credit Card processing fees			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. PNC Bank NA		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [] Transaction ID : D182207 Amount of Each Disbursement this Period [] 775.96	
City Philadelphia	State PA	Zip Code 19153	Category/Type []
Purpose of Disbursement Credit Card processing fees			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	[] 2542.37
TOTAL This Period (last page this line number only).....▶	[]

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

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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 AGENTS PAC

A. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : D182208

Amount of Each Disbursement this Period: 8.03

Memo Item

B. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 07 / 01 / 2017

FEC Identification Number: C

Transaction ID : D182209

Amount of Each Disbursement this Period: 8.38

Memo Item

C. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card processing fees

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2017

FEC Identification Number: C

Transaction ID : D182210

Amount of Each Disbursement this Period: 754.06

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 770.47

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"/> 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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. PNC Bank NA		Date of Disbursement MM / DD / YYYY 07 / 31 / 2017
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] Transaction ID : D182211 Amount of Each Disbursement this Period [REDACTED] 936.46
City Philadelphia	State PA	Zip Code 19153
Purpose of Disbursement Credit Card processing fees		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) B. PNC Bank NA		Date of Disbursement MM / DD / YYYY 07 / 31 / 2017
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] Transaction ID : D182212 Amount of Each Disbursement this Period [REDACTED] 7.97
City Philadelphia	State PA	Zip Code 19153
Purpose of Disbursement Credit Card processing fees		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

Full Name (Last, First, Middle Initial) C. PNC Bank NA		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] Transaction ID : D182213 Amount of Each Disbursement this Period [REDACTED] 8.72
City Philadelphia	State PA	Zip Code 19153
Purpose of Disbursement Credit Card processing fees		Category/Type [REDACTED]
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	<input type="checkbox"/> Memo Item	

SUBTOTAL of Disbursements This Page (optional).....▶	[REDACTED] 953.15
TOTAL This Period (last page this line number only).....▶	[REDACTED]

**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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. PNC Bank NA		Date of Disbursement MM / DD / YYYY 08 / 31 / 2017	
Mailing Address 8800 Tinicum Blvd.		FEC Identification Number C [] Transaction ID : D182214 Amount of Each Disbursement this Period [] 0.44	
City Philadelphia	State PA	Zip Code 19153	Category/Type []
Purpose of Disbursement Credit Card processing fees		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) B. PNC Bank NA		Date of Disbursement MM / DD / YYYY 09 / 30 / 2017	
Mailing Address 8800 Tinicum Blvd.		FEC Identification Number C [] Transaction ID : D182233 Amount of Each Disbursement this Period [] 7.45	
City Philadelphia	State PA	Zip Code 19153	Category/Type []
Purpose of Disbursement Credit Card processing fees		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		FEC Identification Number C [] Amount of Each Disbursement this Period []	
City	State	Zip Code	Category/Type []
Purpose of Disbursement		Memo Item <input type="checkbox"/>	
Candidate Name		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	[] 7.89
TOTAL This Period (last page this line number only).....▶	[] 4273.88

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

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<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 AGENTS PAC

Full Name (Last, First, Middle Initial)

A. AMERIPAC: THE FUND FOR A GREATER AMERICA

Mailing Address 607 14th Street, NW, Suite 800

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution to Committee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 07 / 2017

FEC Identification Number

C C00271338

Transaction ID : D182187

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. First in Freedom PAC

Mailing Address 412 S Capitol St SE
c/o Oorbeek Morehouse Strategies

City Washington State DC Zip Code 20003-4012

Purpose of Disbursement
Contribution to Committee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify)

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
11 / 20 / 2017

FEC Identification Number

C C00540146

Transaction ID : D182193

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. Friends Of Mazie Hirono

Mailing Address PO BOX 677

City Honolulu State HI Zip Code 96809

Purpose of Disbursement
Contribution to Committee

Candidate Name

Hirono, , , ,

Office Sought: House Senate President

Disbursement For: 2018
 Primary General Other (specify) ▼

State: HI District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
07 / 25 / 2017

FEC Identification Number

C C00420760

Transaction ID : D182232

Amount of Each Disbursement this Period

1000.00

Memo Item

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

3000.00

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

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

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(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 AGENTS PAC

A. KATHLEEN RICE FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address PO BOX 744

M M M	/	D D D	/	Y Y Y Y Y
09		13		2017

City MINEOLA State NY Zip Code 11501

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00555813
---	-----------

Candidate Name
Rice, Kathleen, , Rep.,

Category/
Type

Transaction ID : D182189

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: NY District: 04

500.00

Memo Item

B. LAHOOD FOR CONGRESS

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address P.O. BOX 10735

M M M	/	D D D	/	Y Y Y Y Y
08		22		2017

City PEORIA State IL Zip Code 61612

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00575050
---	-----------

Candidate Name
LaHood, Darin, , Rep.,

Category/
Type

Transaction ID : D182185

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: IL District: 18

1000.00

Memo Item

C. NUTMEG PAC

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address 777 SUMMER STREET

M M M	/	D D D	/	Y Y Y Y Y
07		18		2017

City STAMFORD State CT Zip Code 06901

FEC Identification Number

Purpose of Disbursement
Contribution to Committee

C	C00492983
---	-----------

Candidate Name

Category/
Type

Transaction ID : D182183

Amount of Each Disbursement this Period

Office Sought: House Senate President
Disbursement For: 2018 Primary General Other (specify) ▼
State: District:

1000.00

Memo Item

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

2500.00

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

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

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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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. BILL SHUSTER FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 20 / 2017
Mailing Address PO BOX 27		FEC Identification Number C 000364935 Transaction ID : D182191
City HOLLIDAYSBURGH	State PA	Zip Code 16648
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 2500.00
Candidate Name Shuster, Bill, , Rep.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 09	

Full Name (Last, First, Middle Initial) B. QUIGLEY FOR CONGRESS		Date of Disbursement MM / DD / YYYY 07 / 17 / 2017
Mailing Address PO BOX 13040		FEC Identification Number C 000457556 Transaction ID : D182182
City CHICAGO	State IL	Zip Code 60613
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 1000.00
Candidate Name Quigley, Mike, , Rep.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IL	District: 05	

Full Name (Last, First, Middle Initial) C. CITIZENS TO ELECT RICK LARSEN		Date of Disbursement MM / DD / YYYY 09 / 25 / 2017
Mailing Address PO BOX 326		FEC Identification Number C 000345546 Transaction ID : D182190
City EVERETT	State WA	Zip Code 98206
Purpose of Disbursement Contribution to Committee		Amount of Each Disbursement this Period 2500.00
Candidate Name Larsen, Rick, , Rep.,		Memo Item <input type="checkbox"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 02	

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

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

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<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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. STEVE COHEN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 09 / 11 / 2017
Mailing Address 349 KENILWORTH PLACE		FEC Identification Number C00422980 Transaction ID : D182188 Amount of Each Disbursement this Period 1000.00
City MEMPHIS	State TN	Zip Code 38112
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name Cohen, Steve, , Rep.,		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: TN	District: 09	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) B. JEFF FLAKE FOR US SENATE INC		Date of Disbursement MM / DD / YYYY 08 / 24 / 2017
Mailing Address PO BOX 12512		FEC Identification Number C00347260 Transaction ID : D182186 Amount of Each Disbursement this Period 1000.00
City TEMPE	State AZ	Zip Code 85284
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name Flake, Jeff, , Sen.,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	
State: AZ	District: 00	<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) C. WICKER FOR SENATE		Date of Disbursement MM / DD / YYYY 11 / 01 / 2017
Mailing Address PO BOX 64		FEC Identification Number C00443218 Transaction ID : D182192 Amount of Each Disbursement this Period 2500.00
City JACKSON	State MS	Zip Code 39205
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name Wicker, Roger, , Sen.,		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2018 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MS	District: 00	<input type="checkbox"/> Memo Item

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

4500.00

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

16000.00