

# 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) **123 N. Pitt. St.**  
**Suite 400**  
 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:  
 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  /  /  in the State of   
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on  /  /  in the State of

5. Covering Period  /  /  2023 through  /  /  2023

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  /  /  2023

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 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="2023"/>		375321.59
(b) Cash on Hand at Beginning of Reporting Period.....	435116.25	
(c) Total Receipts (from Line 19) .....	40150.07	174632.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	475266.32	549953.62
7. Total Disbursements (from Line 31).....	25000.00	99687.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	450266.32	450266.32
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	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: 06 / 01 / 2023 To: 06 / 30 / 2023

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).....	27628.56	126434.54
(ii) Unitemized .....	4264.60	35154.74
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	31893.16	161589.28
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	5000.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	36893.16	169089.28
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.).....	3256.91	5542.75
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)).....▶	40150.07	174632.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	40150.07	174632.03

**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 .....	0.00	1687.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	1687.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	25000.00	98000.00
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)) ..	25000.00	99687.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	25000.00	99687.30

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	36893.16	169089.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36893.16	169089.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	1687.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	1687.30

**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 ADVISORS, INC. PAC**

**A. Adriano, Keisha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 441336  
 City Fort Washington State MD Zip Code 20749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travelwise International Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.25

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16603**  
 Amount of Each Receipt this Period 153.84  
 Memo Item

**B. 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:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1350.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16648**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Bedell, Kathy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9393 Pratulino Villa Dr  
 City Dublin State OH Zip Code 43016  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) BCD Travel Occupation (for Individual) Senior Vice President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt 06 / 29 / 2023  
**Transaction ID : SA11AI.16826**  
 Amount of Each Receipt this Period 2000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2253.84
<b>TOTAL</b> 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"/> 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. Bjarnesen, Meghann, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2238 Atkinson St  
 City Detroit State MI Zip Code 48206  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Beste Travel Design Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16641**  
 Amount of Each Receipt this Period 205.12  
 Memo Item

**B. Bonin, Pamela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 N. Pitt St. Ste 400  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASTA Occupation (for Individual) Director, Strategic Member Partnership  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.64

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16571**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**C. Calloway, Meredith, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 182 Old Post Rd  
 City Mooresville State NC Zip Code 28117  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gifted Travel Network Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16629**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	561.53
<b>TOTAL</b> 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"/> 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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**AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC**

**A. Carpenter, Thomas, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 408 E. 7th Street  
 City Brooklyn State NY Zip Code 11218  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Huckleberry Travel Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2051.26

Date of Receipt 06 / 14 / 2023  
**Transaction ID : SA11AI.16545**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

**B. Cestero, Alejandro, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 143 Stoney Creek Dr  
 City Houston State TX Zip Code 77024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Virtuoso Occupation (for Individual) General Counsel  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16600**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**C. Chapin, Brian, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 950 N Michigan Avenue Apt. 3604  
 City Chicago State IL Zip Code 60611-4508  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Scenic Luxury Cruises & Tours Occupation (for Individual) Travel Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 769.23

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16604**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	564.10
<b>TOTAL</b> 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"/> 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. Chiarini, Jade, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1920 N Heliotrope Dr  
 City Santa Ana State CA Zip Code 92706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CTA Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2023  
**Transaction ID : SA11AI.16569**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**B. Coleman, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 211 Lombardy Ave  
 City El Paso State TX Zip Code 79922  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Sun Travel Occupation (for Individual) Travel Advisor  
 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  
 06 / 22 / 2023  
**Transaction ID : SA11AI.16680**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**C. Georjon, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 641 Lexington Avenue  
 13th Floor  
 City New York State NY Zip Code 10022  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Envizage Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 22 / 2023  
**Transaction ID : SA11AI.16679**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	762.82
<b>TOTAL</b> 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 ADVISORS, INC. PAC**

**A. Geraci, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 730 Silverhedge Dr  
 City Cincinnati State OH Zip Code 45231  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Prestige Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.97

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16644**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**B. Goodenow, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1245 Young St 203  
 City Honolulu State HI Zip Code 96814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) HNL Travel Associates Occupation (for Individual) President/Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16562**  
 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:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1412.82

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16634**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.38
<b>TOTAL</b> 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"/> 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. Hale, Rob, , ,**  
 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:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1412.82

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16633**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**B. Henry, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 N. Pitt St. Ste 400  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASTA Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 615.38

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16561**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Hershberger, David, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9887 Montgomery Rd  
 City Montgomery State OH Zip Code 45242  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Prestige Travel Leaders Inc Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2666.66

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16602**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	461.53
<b>TOTAL</b> 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"/> 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. Horan, Diane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 688 San Pablo Ave  
 City Casselberry State FL Zip Code 32707  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) AMAWaterways Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.56

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16586**  
 Amount of Each Receipt this Period 100.00  
 Memo Item

**B. Jackson, Denise, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4128 Via Mar De Delfinas  
 City San Diego State CA Zip Code 92130-2670  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Balboa Travel Inc. Occupation (for Individual) President &CEO  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16577**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. Kerby, Zane, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 N. Pitt St. Ste. 400  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Am. Soc. of Travel Advisors Occupation (for Individual) CEO  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1762.82

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16582**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5350.00
<b>TOTAL</b> 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"/> 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. Klimak, Amanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1525 Hamilton Ave  
 City Waterbury State CT Zip Code 06706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Largay Travel Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 972.00

Date of Receipt 06 / 12 / 2023  
**Transaction ID : SA11AI.16538**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

**B. Klimak, Amanda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1525 Hamilton Ave  
 City Waterbury State CT Zip Code 06706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Largay Travel Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1228.41

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16564**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**C. Largay, Paul, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2 Westlake Road  
 City Middlebury State CT Zip Code 06762  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Largay Travel Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1250.00

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16565**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	568.41
<b>TOTAL</b> 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"/> 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. Lee, Jenn, , ,**  
 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  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1162.82

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16568**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Light, Wade, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 264 Jenkins Rd  
 City Saco State ME Zip Code 04072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Light Travels LLC Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.97

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16572**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Light, Wade, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 264 Jenkins Rd  
 City Saco State ME Zip Code 04072  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Light Travels LLC Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 410.25

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16658**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	403.84
<b>TOTAL</b> 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"/> 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. Little, Sarah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 123 N Pitt St  
400

City Alexandria State VA Zip Code 22314

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

Name of Employer (for Individual) ASTA Occupation (for Individual) Business Development VP

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
356.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2023

**Transaction ID : SA11AI.16656**

Amount of Each Receipt this Period  
100.00

Memo Item

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

Mailing Address 135 W Horizon Drive

City Boise State ID Zip Code 83703

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

Name of Employer (for Individual) Global Travel Occupation (for Individual) Travel Advisor

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  
 06 / 20 / 2023

**Transaction ID : SA11AI.16598**

Amount of Each Receipt this Period  
500.00

Memo Item

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

Mailing Address 4725 Old Buckingham Rd

City Powhatan State VA Zip Code 23139

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

Name of Employer (for Individual) Allianz Occupation (for Individual) Travel Advisor

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
358.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2023

**Transaction ID : SA11AI.16607**

Amount of Each Receipt this Period  
102.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	702.56
<b>TOTAL</b> 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 ADVISORS, INC. PAC**

**A. Lustig, Suzanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4725 Old Buckingham Rd  
 City Powhatan State VA Zip Code 23139  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Allianz Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.61

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2023  
**Transaction ID : SA11AI.16661**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

**B. Maryanov, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 S Barrington Ave Ste 316  
 City Los Angeles State CA Zip Code 90025-5379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All Travel Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 21 / 2023  
**Transaction ID : SA11AI.16660**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**C. Mazza, Nicole, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 93 Bay Road  
 City Huntington State NY Zip Code 11743  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Savers Occupation (for Individual) Exec VP Marketing  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2564.10

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2023  
**Transaction ID : SA11AI.16610**  
 Amount of Each Receipt this Period  
 2564.10  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3102.56
<b>TOTAL</b> 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"/> 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. Mazza-Burney, Kathryn, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 71 Audrey Ave  
 City Oyster Bay State NY Zip Code 11771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Savers Occupation (for Individual) Exec VP Sales  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16606**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

**B. McGovern, Vanessa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 E Statesville Avenue Suite 101  
 City Mooresville State NC Zip Code 28115  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gifted Travel Network, Inc. Occupation (for Individual) Co-Founder & Chief Sales Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 615.38

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16615**  
 Amount of Each Receipt this Period 512.82  
 Memo Item

**C. McNeill, Jarod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 69478  
 City Seattle State WA Zip Code 98168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jarod's Journeys Occupation (for Individual) Owner/Agent  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 369.21

Date of Receipt 06 / 12 / 2023  
**Transaction ID : SA11AI.16540**  
 Amount of Each Receipt this Period 10.25  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3023.07
<b>TOTAL</b> 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"/> 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. McNeill, Jarod, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 69478  
 City Seattle State WA Zip Code 98168  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Jarod's Journeys Occupation (for Individual) Owner/Agent  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 374.33

Date of Receipt 06 / 22 / 2023  
**Transaction ID : SA11AI.16684**  
 Amount of Each Receipt this Period 5.12  
 Memo Item

**B. Meloro, Anthony, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9840 SW 3rd Ct  
 City Plantation State FL Zip Code 33324  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Royal Caribbean Occupation (for Individual) Director Business Development  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16584**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Moore, Amy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8203 Stone Trail Dr  
 City Bethesda State MD Zip Code 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Avenue Two Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16580**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	364.09
<b>TOTAL</b> 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"/> 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. Musso, Samantha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 81191 Osprey Dr  
 City Bush State LA Zip Code 70431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) New Destinations Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16636**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

**B. Olivere, Camille, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 112 Hopeton Ln  
 City Eatonton State GA Zip Code 31024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Globus Family of Brands Occupation (for Individual) Chief Sales Officer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1102.56

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16666**  
 Amount of Each Receipt this Period 102.56  
 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:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1017.92

Date of Receipt 06 / 15 / 2023  
**Transaction ID : SA11AI.16546**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	455.12
<b>TOTAL</b> 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"/> 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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Paugh, Jean, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2023 <b>Transaction ID : SA11AI.16655</b>
Mailing Address 1240 US Hwy 1 Ste 6		Amount of Each Receipt this Period 256.41
City Rockledge	State FL	Zip Code 32955
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) All About You Travel Unlimited	Occupation (for Individual) Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1274.33	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Peck, Eben, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 20 / 2023 <b>Transaction ID : SA11AI.16560</b>
Mailing Address 123 N. Pitt St. Ste 400		Amount of Each Receipt this Period 250.00
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) EVP, Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1150.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Peck, Eben, , ,</b>		Date of Receipt MM / DD / YYYY 06 / 21 / 2023 <b>Transaction ID : SA11AI.16657</b>
Mailing Address 123 N. Pitt St. Ste 400		Amount of Each Receipt this Period 50.00
City Alexandria	State VA	Zip Code 22314
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) EVP, Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 1200.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	556.41
<b>TOTAL</b> 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 ADVISORS, INC. PAC**

**A. Peters, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8432 Old Keene Mill Road  
 49608425  
 City Springfield State VA Zip Code 22152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Friendly Travel Inc. Occupation (for Individual) President  
 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  
 06 / 20 / 2023  
**Transaction ID : SA11AI.16608**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

**B. Pope, Jay, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 600 Corporate Park Dr  
 City Saint Louis State MO Zip Code 63105  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Enterprise Holdings Occupation (for Individual) Global Strategic Sales Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 356.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 20 / 2023  
**Transaction ID : SA11AI.16587**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Pross, Yuri, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 313 Remington Ranch Rd  
 City Carpenter State NY Zip Code 82054  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) YP Journeys Occupation (for Individual) Owner  
 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  
 06 / 20 / 2023  
**Transaction ID : SA11AI.16619**  
 Amount of Each Receipt this Period  
 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	600.00
<b>TOTAL</b> 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 ADVISORS, INC. PAC**

**A. Reitz, Hannah, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2609 Shoal Park Rd  
 City Concord State NC Zip Code 28027  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Gifted Travel Network Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 533.33

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16639**  
 Amount of Each Receipt this Period 20.51  
 Memo Item

**B. Rinkoski, Lynne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 310 S Michigan Ave. #1405  
 City Chicago State IL Zip Code 60604  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Premium Travel and Cruises Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2538.46

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16596**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

**C. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 262.00

Date of Receipt 06 / 29 / 2023  
**Transaction ID : SA11AI.16828**  
 Amount of Each Receipt this Period 250.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1270.51
<b>TOTAL</b> 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 23 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 ADVISORS, INC. PAC**

**A. Rowan, Beth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 223 Redland Blvd  
 City Rockville State MD Zip Code 20850  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tapestry Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16673**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**B. Ruiz, Julie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 16 E Avenue A Suite 209  
 City Temple State TX Zip Code 76501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Love Group Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 06 / 12 / 2023  
**Transaction ID : SA11AI.16539**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Russo, Sandy & Ron, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9325 Scarborough Ct  
 City Port Saint Lucie State FL Zip Code 34986  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Best Price Cruises Occupation (for Individual) Travel Advisors  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 06 / 22 / 2023  
**Transaction ID : SA11AI.16675**  
 Amount of Each Receipt this Period 1000.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1358.97
<b>TOTAL</b> 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 24 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 ADVISORS, INC. PAC**

**A. Schatz, Tracy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 9 Allenwood Circle  
 City Schuylkill Haven State PA Zip Code 17972  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Elite Travel Journeys Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16647**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**B. Schottey, Michael, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 123 N. Pitt St Ste 400  
 City Alexandria State VA Zip Code 22314  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) ASTA Occupation (for Individual) Communications Director  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 717.94

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16574**  
 Amount of Each Receipt this Period 205.12  
 Memo Item

**C. Sprague Costa, Amber, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 21000 Wallace Rd  
 City Parsons State KS Zip Code 67357  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cruise Planners Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16646**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	564.09
<b>TOTAL</b> 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 25 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 ADVISORS, INC. PAC**

**A. Swales, April, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1021 Larabee Lane  
 City Apex State NC Zip Code 27523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Uniglobe Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16573**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**B. Swales, April, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1021 Larabee Lane  
 City Apex State NC Zip Code 27523  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Uniglobe Travel Occupation (for Individual) Travel Advisor  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.24

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16659**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Thomas, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2801 Chestnut Ridge Pl  
 City Louisville State KY Zip Code 40245  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Altour Occupation (for Individual) COO | President  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 1538.46

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16613**  
 Amount of Each Receipt this Period 512.82  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	717.94
<b>TOTAL</b> 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 26 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	<input type="checkbox"/> 17

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

**A. Thomas-Schulere, Stephen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7900 Harbor Island Dr  
 City North Bay Village State FL Zip Code 33141  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Balboa Occupation (for Individual) Senior Vice President, Strategic Solut  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.69

Date of Receipt 06 / 20 / 2023  
**Transaction ID : SA11AI.16601**  
 Amount of Each Receipt this Period 307.69  
 Memo Item

**B. Upchurch, Matthew, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 777 Main St. Suite 900  
 City Forth Worth State TX Zip Code 76102  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Virtuso Occupation (for Individual) President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2564.10

Date of Receipt 06 / 19 / 2023  
**Transaction ID : SA11AI.16550**  
 Amount of Each Receipt this Period 2564.10  
 Memo Item

**C. Wise, Ajanaclair, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 405 Coopers Hawk Drive  
 City Summerville State SC Zip Code 29483  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Ajanaclair Wise Travel LLC Occupation (for Individual) Owner  
 Receipt For:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 21 / 2023  
**Transaction ID : SA11AI.16650**  
 Amount of Each Receipt this Period 500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3371.79
<b>TOTAL</b> This Period (last page this line number only).....▶	27628.56

**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 27 OF 31
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" 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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**ENTERPRISE HOLDINGS, INC. POLITICAL ACTION COMMITTEE**

Mailing Address **600 CORPORATE PARK DRIVE**

City <b>ST. LOUIS</b>	State <b>MO</b>	Zip Code <b>63105</b>
--------------------------	--------------------	--------------------------

FEC ID number of contributing federal political committee. **C** **C00219642**

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**5000.00**

Date of Receipt  
**06 / 29 / 2023**

**Transaction ID : SA11C.16830**

Amount of Each Receipt this Period  
**5000.00**

Memo Item  
PAC to PAC Transfer

**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

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

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>5000.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>5000.00</b>

**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 28 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 ADVISORS, INC. PAC**

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

Mailing Address 8800 Tinicum Blvd.

City Philidelphia	State PA	Zip Code 19153
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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 ▼  
5542.75

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		30		2023

**Transaction ID : SA17.16858**

Amount of Each Receipt this Period  
3256.91

Memo Item  
Interest/Dividends Income plus Unrealized Loss on Investments

**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
-----	---	-----	---	---------

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
-----	---	-----	---	---------

Amount of Each Receipt this Period

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3256.91
<b>TOTAL</b> This Period (last page this line number only).....	3256.91

# 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. COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH PLACE

City  
MEMPHIS

State  
TN

Zip Code  
38112

Purpose of Disbursement  
Contribution to Candidate Committee

011

Candidate Name

**COHEN, STEVE I MR., , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: TN District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	3

FEC Identification Number

C C00422980

**Transaction ID : SB23.16841**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH PLACE

City  
MEMPHIS

State  
TN

Zip Code  
38112

Purpose of Disbursement  
Contribution to Candidate Committee

011

Candidate Name

**COHEN, STEVE I MR., , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify)

State: TN District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	2	3

FEC Identification Number

C C00422980

**Transaction ID : SB23.16844**

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. JULIA BROWNLEY FOR CONGRESS

Mailing Address PO BOX 2018

City  
THOUSAND OAKS

State  
CA

Zip Code  
91358

Purpose of Disbursement  
Contribution to Candidate Committee

011

Candidate Name

**BROWNLEY, JULIA, , ,**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2024  
 Primary  General  
 Other (specify) ▼

State: CA District: 26

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	2	3

FEC Identification Number

C C00513077

**Transaction ID : SB23.16851**

Amount of Each Disbursement this Period

2500.00

Memo Item

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

7500.00

**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. LORI CHAVEZ-DEREMER FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
LORI CHAVEZ-DEREMER FOR CONGRESS

Date of Disbursement: 06 / 16 / 2023

Mailing Address: 13203 SE 172ND AVE, STE 166 #399

City: HAPPY VALLEY, State: OR, Zip Code: 97086

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: CHAVEZ-DEREMER, LORI, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2024,  Primary,  General,  Other (specify) ▼

State: OR, District: 05

FEC Identification Number: C00784520  
Transaction ID: SB23.16834  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

**B. MARC FOR US INC.**

Full Name (Last, First, Middle Initial)  
MARC FOR US INC.

Date of Disbursement: 06 / 29 / 2023

Mailing Address: PO BOX 5158

City: POUGHKEEPSIE, State: NY, Zip Code: 12602

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: MOLINARO, MARCUS J., , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2024,  Primary,  General,  Other (specify) ▼

State: NY, District: 19

FEC Identification Number: C00789586  
Transaction ID: SB23.16856  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

**C. MIKE BOST FOR CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)  
MIKE BOST FOR CONGRESS COMMITTEE

Date of Disbursement: 06 / 13 / 2023

Mailing Address: PO BOX 1212

City: MURPHYSBORO, State: IL, Zip Code: 62966

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: BOST, MICHAEL, , ,

Office Sought:  House,  Senate,  President

Disbursement For: 2024,  Primary,  General,  Other (specify) ▼

State: IL, District: 12

FEC Identification Number: C00546499  
Transaction ID: SB23.16835  
Amount of Each Disbursement this Period: 2500.00

Category/Type: 011

Memo Item

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

7500.00

**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. PETE STAUBER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2023

Mailing Address 23 W CENTRAL ENTRANCE  
PMB #333

City DULUTH State MN Zip Code 55811

Purpose of Disbursement  
Contribution to Candidate Committee

011
Category/ Type

FEC Identification Number

C C00650697

Transaction ID : SB23.16846

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Candidate Name

STAUBER, PETER ALLEN, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: MN District: 08

Full Name (Last, First, Middle Initial)

### B. SCOTT PETERS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	27	/	2023

Mailing Address PO BOX 22074

City SAN DIEGO State CA Zip Code 92192

Purpose of Disbursement  
Contribution to Candidate Committee

011
Category/ Type

FEC Identification Number

C C00503110

Transaction ID : SB23.16839

Amount of Each Disbursement this Period

2500.00
---------

Memo Item

Candidate Name

PETERS, SCOTT, , ,

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: CA District: 50

Full Name (Last, First, Middle Initial)

### C. SMART SOLUTIONS PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	30	/	2023

Mailing Address 611 PENNSYLVANIA AVE SE  
UNIT 143

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution to Political Action Committee

011
Category/ Type

FEC Identification Number

C C00654475

Transaction ID : SB23.16847

Amount of Each Disbursement this Period

5000.00
---------

Memo Item

Candidate Name

SMART SOLUTIONS PAC

Office Sought:  House  Senate  President  
Disbursement For: 2024  Primary  General  Other (specify) ▼

State: District:

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

10000.00
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TOTAL This Period (last page this line number only).....▶

25000.00
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