FEC FORM 1		STATEMEN ORGANIZA		PAGE 1 / 5 —					
1. NAME OF COMMITTEE (ir	n full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5					
American S	Society	of Travel Advise	ors, Inc. PAC						
ADDRESS (number a	nd street)	123 N. Pitt. St.							
<ul> <li>(Check if a is changed)</li> </ul>		Ste 400							
		Alexandria └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └ └		VA 22 STATE ▲	2314 				
COMMITTEE'S E-MA		SS							
(Check if a is changed		astapac@asta.org							
		Optional Second E-Mail Add astapac@asta.org	ress						
COMMITTEE'S WEB	address	PRESS (URL)							
2. DATE 03	M / D 3 09	2023							
3. FEC IDENTIFIC	CATION NU	MBER ► C CO	0114108						
4. IS THIS STATEM		NEW (N) OR	× AMENDED (A)						
I certify that I have e	examined thi	s Statement and to the best	of my knowledge and belief it	is true, correct ar	nd complete.				
Type or Print Name	of Treasurer	Peck, Eben, , ,							
Signature of Treasure	er Peck, E	Eben, , ,	[Electronically Filed]	Date 03	/ D D / Y Y Y Y 09 2023				
NOTE: Submission of	false, errone		nay subject the person signing ION SHOULD BE REPORTED		e penalties of 52 U.S.C. §3010				
Office Use Only			For further information c Federal Election Commissi Toll Free 800-424-9530 Local 202-694-1100		FEC FORM 1 (Revised 06/2012)				

Image# 202303099578980377

03/09/2023 16 : 42

FE	EC Form 1 (Revised 03/2022)	Page <b>2</b>
5.	TYPE OF COMMITTEE:	
	Candidate Committee:	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the c information below.)	candidate
	Name of Candidate ['','','','', ''	
	Candidate Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
	Party Committee:       (National, State or subordinate) committee of the       (Democratic, Republican, et or subordinate)	c.) Party
	Political Action Committee (PAC):         (e)       Image: Committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization on line 6.)	organization is a:
	Corporation Corporation w/o Capital Stock	anization
	Membership Organization X Trade Association Cooperative	е
	✗ In addition, this committee is a Lobbyist/Registrant PAC.	
	(f) This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated f committee. (i.e., nonconnected committee)	und or party
	In addition, this committee is a Lobbyist/Registrant PAC.	
	In addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)	
	(g) This committee is an independent expenditure-only political committee (Super PAC).	
	In addition, this committee is a Lobbyist/Registrant PAC.	
	(h) This committee is a political committee with both contribution and non-contribution accounts (Hybrid PAC)	
	In addition, this committee is a Lobbyist/Registrant PAC.	

## Joint Fundraising Representative:

FEC Form 1 (Revised 02/2009)
------------------------------

Write or Type Committee Name

## American Society of Travel Advisors, Inc. PAC

6.	Name of Any Connected Or American Society of	-		ittee, .	Joint	Fund	raisi	ng R	epre	senta	tive,	or I	Leade	ership	PAC	Spo	ısor	
			,															
																		]
	Mailing Address	123 N. Pitt. St.				Í												
		Suite 400																
		Alexandria								VA		l	2231	4		·		
			CITY							STATE				ZIF	o coi	DE 🔺		
	Relationship: X Connected	Organization Affili	ated Orga	anizatio	on	Jo	int Fu	undra	ising	Repre	senta	tive		Lea	dershi	p PAC	; Spo	nsor

7. **Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Peck, Ebe	l, , ,	
Full Name		
Mailing Address	123 N. Pitt. St.	
	Suite 400	
	Alexandria	
	CITY ▲ STATE ▲ ZIP CODE ▲	
Title or Position ▼		
EVP, Advocacy	Telephone number     703     739     684	42 

8. **Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).

Full Name	Peck, Eben, , ,
of Treasurer	
Mailing Address	123 N. Pitt. St.
	Ste. 400
	Alexandria VA 22314
	CITY ▲ STATE ▲ ZIP CODE ▲
Title or Position	7
EVP, Advocacy	Telephone number     703     739     6842

FEC Form 1 (Revised 02/2009)								
Full Name of Designated Agent	Klement, Jessica, , ,							
Mailing Address	123 N. Pitt. St.							
	Suite 400							
	Alexandria VA 22314							
	CITY A STATE A Z	IP CODE ▲						
Title or Position								
VP, Advocacy	Telephone number	39 - 8711						

9. Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

	PNC Bank-	Corce	лап	1	I				I	I	I		I		I	I	I		I	I	1 1	. 1
Mailing Address	150	3 Pennsy	Ivania /	Aven	ue, N	100																
	Wa	shington											DC			2	000	5				
					CIT	(▲						S	TATE	E 🔺				Z	ZIP	COD	)Е 🔺	
Name of Bank, D	epository, etc.																					
Mailing Address																						. 1

## :97 `A=G79 @@5 B9CIG`H9LH`F9 @5 H98 `HC`5 `F9DCFHžG7<98 I@9 `CF`+H9A=N5 H=CB

Form/Schedule: F1A Transaction ID :

ASTA has moved to 123 N. Pitt. St. Ste. 400 Alexandria, VA 22314. Thank you.

Form/Schedule: Transaction ID: