

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2013"/>		160708.84
(b) Cash on Hand at Beginning of Reporting Period.....	181803.67	
(c) Total Receipts (from Line 19)	26592.55	67255.55
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	208396.22	227964.39
7. Total Disbursements (from Line 31).....	22170.75	41738.92
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	186225.47	186225.47
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY 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

FEC Form 3X (Rev. 06/2004)

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).....	13370.00	40331.00
(ii) Unitemized	4720.00	18422.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	18090.00	58753.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	8500.00	8500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	26590.00	67253.00
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.).....	2.55	2.55
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))..... ▶	26592.55	67255.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	26592.55	67255.55

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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	670.75	2238.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	670.75	2238.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	2500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	21500.00	37000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(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	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	22170.75	41738.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	22170.75	41738.92

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	26590.00	67253.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	26590.00	67253.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	670.75	2238.92
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	670.75	2238.92

**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 38
<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

Full Name (Last, First, Middle Initial) A. Gloria Bohan		Date of Receipt M M M / D D D / Y Y Y Y Y Y 12 / 31 / 2013 Transaction ID : C2534171
Mailing Address 3102 Omega Office Park		Amount of Each Receipt this Period 1500.00
City Fairfax	State VA	Zip Code 22031-2400
FEC ID number of contributing federal political committee. C		
Name of Employer Omega World Travel	Occupation President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00	

Full Name (Last, First, Middle Initial) B. Lisa Buckner		Date of Receipt M M M / D D D / Y Y Y Y Y Y 08 / 16 / 2013 Transaction ID : C2410317
Mailing Address 5900 Rowland Road		Amount of Each Receipt this Period 250.00
City Minnetonka	State MN	Zip Code 55343-8924
FEC ID number of contributing federal political committee. C		
Name of Employer Corporate Travel Solutions	Occupation President & COO	
Receipt For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. Velma Chen		Date of Receipt M M M / D D D / Y Y Y Y Y Y 09 / 04 / 2013 Transaction ID : C2437166
Mailing Address 3715 Terstena Pl Apt 309		Amount of Each Receipt this Period 300.00
City Santa Clara	State CA	Zip Code 95051-2562
FEC ID number of contributing federal political committee. C		
Name of Employer Information Requested	Occupation Information Requested	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	2050.00
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:	PAGE 7 OF 38
(check only one)	
<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. Jason Coleman
Full Name (Last, First, Middle Initial)
Mailing Address 3002 Midvale Ave Ste 202

City	State	Zip Code
Los Angeles	CA	90034

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

Name of Employer	Occupation
Jason Coleman, Inc.	Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2013
Transaction ID : C2401942

Amount of Each Receipt this Period
50.00

B. Jason Coleman
Full Name (Last, First, Middle Initial)
Mailing Address 3002 Midvale Ave Ste 202

City	State	Zip Code
Los Angeles	CA	90034

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

Name of Employer	Occupation
Jason Coleman, Inc.	Owner

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 07 / 19 / 2013
Transaction ID : C2401943

Amount of Each Receipt this Period
50.00

C. Jason Coleman
Full Name (Last, First, Middle Initial)
Mailing Address 3002 Midvale Ave Ste 202

City	State	Zip Code
Los Angeles	CA	90034

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

Name of Employer	Occupation
Jason Coleman, Inc.	Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : C2423762

Amount of Each Receipt this Period
50.00

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: PAGE 8 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

A. Jason Coleman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3002 Midvale Ave Ste 202
 City Los Angeles State CA Zip Code 90034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jason Coleman, Inc. Occupation Owner
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 06 / 2013
Transaction ID : C2436364
 Amount of Each Receipt this Period
 50.00

B. Jason Coleman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3002 Midvale Ave Ste 202
 City Los Angeles State CA Zip Code 90034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jason Coleman, Inc. Occupation Owner
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : C2430956
 Amount of Each Receipt this Period
 50.00

C. Jason Coleman
 Full Name (Last, First, Middle Initial)
 Mailing Address 3002 Midvale Ave Ste 202
 City Los Angeles State CA Zip Code 90034
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Jason Coleman, Inc. Occupation Owner
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 850.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : C2448120
 Amount of Each Receipt this Period
 50.00

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: PAGE 9 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

Full Name (Last, First, Middle Initial)
A. Jason Coleman

Mailing Address 3002 Midvale Ave Ste 202

City Los Angeles State CA Zip Code 90034

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

Name of Employer Jason Coleman, Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : C2499832

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. Jason Coleman

Mailing Address 3002 Midvale Ave Ste 202

City Los Angeles State CA Zip Code 90034

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

Name of Employer Jason Coleman, Inc. Occupation Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **850.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2013

Transaction ID : C2534124

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
C. Jean Covelli

Mailing Address 2495 Main St Ste 340

City Buffalo State NY Zip Code 14214-2154

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

Name of Employer The Travel Team, Inc/American Express Occupation President

Receipt For: 2014
 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
10 / 11 / 2013

Transaction ID : C2448123

Amount of Each Receipt this Period
250.00

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: PAGE 10 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

A. Christopher Dane
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Fox Run Road
 City Norwalk State CT Zip Code 06850
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unlimited Travel Solutions Occupation President
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 13 / 2013
Transaction ID : C2534138
 Amount of Each Receipt this Period
 250.00

B. Michael Dixon
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 BNA Dr, Bldg 200 Ste 650
 City Nashville State TN Zip Code 37217-2518
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Travelink/American Express Occupation President
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 08 / 16 / 2013
Transaction ID : C2410321
 Amount of Each Receipt this Period
 500.00

C. Joan Duran
 Full Name (Last, First, Middle Initial)
 Mailing Address 54 Fox Run Rd
 City Norwalk State CT Zip Code 06850-2321
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Unlimited Travel Solutions, Inc. Occupation President
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 02 / 2013
Transaction ID : C2621687
 Amount of Each Receipt this Period
 250.00

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 11 OF 38
	<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

Full Name (Last, First, Middle Initial)
A. Jay Ellenby

Mailing Address 126 S Main St

City State Zip Code
Bel Air MD 21014

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

Name of Employer Occupation
Safe Harbors Business Travel Group President

Receipt For: 2014
 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
09 / 27 / 2013
Transaction ID : C2439339

Amount of Each Receipt this Period
200.00

Full Name (Last, First, Middle Initial)
B. Ken Gagliano

Mailing Address 2500 Maitland Center Pky Suite 130

City State Zip Code
Maitland FL 32751

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

Name of Employer Occupation
Travel Planners International, Inc. President

Receipt For: 2014
 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
09 / 23 / 2013
Transaction ID : C2437167

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Wendy Goodenow

Mailing Address 1245 Young St #203

City State Zip Code
Honolulu HI 96814-1958

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

Name of Employer Occupation
HNL Travel Associates President/Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 01 / 2013
Transaction ID : C2621672

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional).....▶	950.00
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 38
	<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

Full Name (Last, First, Middle Initial)
A. William Haire

Mailing Address 404 Bna Dr
Ste 650

City Nashville State TN Zip Code 37217-2520

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

Name of Employer Travelink/American Express Occupation Managing Partner

Receipt For: 2012
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
08 / 16 / 2013
Transaction ID : C2410322

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
B. Roger Hale

Mailing Address 4555 Southlake Parkway

City Birmingham State AL Zip Code 35244-3238

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

Name of Employer ADTRAV Travel Management Occupation President/CEO

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
08 / 23 / 2013
Transaction ID : C2417554

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Alan Hess

Mailing Address 150 North Main Street
Suite 200

City Bountiful State UT Zip Code 84010-6117

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

Name of Employer Hess Corporate Travel Occupation Travel Agent

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
11 / 08 / 2013
Transaction ID : C2499824

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 1200.00

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 38
	<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. Cheryl Hudak
Full Name (Last, First, Middle Initial)

Mailing Address 5110 East Wallace Avenue

City State Zip Code
Scottsdale AZ 85254

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

Name of Employer Occupation
Welcome Aboard Travel Agent

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : C2621610

Amount of Each Receipt this Period
 250.00

B. Denise Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 5414 Oberlin Dr #300

City State Zip Code
San Diego CA 92121

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

Name of Employer Occupation
Balboa Travel, Inc Information Requested

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 12 / 27 / 2013
Transaction ID : C2534153

Amount of Each Receipt this Period
 500.00

C. Thomas Jackson
Full Name (Last, First, Middle Initial)

Mailing Address 620 N Main St

City State Zip Code
Santa Ana CA 92701-4191

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

Name of Employer Occupation
World Travel Bureau, Inc. President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : C2401935

Amount of Each Receipt this Period
 250.00

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 14 OF 38
	<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. John Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 7208 Falls of Neuse
Suite 220

City Raleigh State NC Zip Code 27615

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

Name of Employer: Travel Management Partners, Inc. Occupation: President & CEO

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
11 / 08 / 2013

Transaction ID : C2499820

Amount of Each Receipt this Period
250.00

B. John Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 7208 Falls of Neuse
Suite 220

City Raleigh State NC Zip Code 27615

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

Name of Employer: Travel Management Partners, Inc. Occupation: President & CEO

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
12 / 06 / 2013

Transaction ID : C2534131

Amount of Each Receipt this Period
250.00

C. John Lewis
Full Name (Last, First, Middle Initial)

Mailing Address 7208 Falls of Neuse
Suite 220

City Raleigh State NC Zip Code 27615

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

Name of Employer: Travel Management Partners, Inc. Occupation: President & CEO

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **750.00**

Date of Receipt
12 / 16 / 2013

Transaction ID : C2534134

Amount of Each Receipt this Period
250.00

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: PAGE 15 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

Full Name (Last, First, Middle Initial)
A. Laura Kristi Long

Mailing Address 1101 King Street
Suite 200

City State Zip Code
Alexandria VA 22314

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

Name of Employer Occupation
American Society of Travel Agents Senior Director, Education

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
 07 / 22 / 2013
Transaction ID : C2401928

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Sunil Mahtani

Mailing Address 181 East 73rd Street

City State Zip Code
New York NY 10021

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

Name of Employer Occupation
Ovation travel Group, Inc. Information Requested

Receipt For: 2012
 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
 08 / 16 / 2013
Transaction ID : C2410319

Amount of Each Receipt this Period
500.00

Full Name (Last, First, Middle Initial)
C. Lynda Maxwell

Mailing Address 4785 Dorsey Hall Drive
Suite 102

City State Zip Code
Ellicott City MD 21042-7862

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

Name of Employer Occupation
Destinations, Inc. President

Receipt For: 2014
 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
 09 / 27 / 2013
Transaction ID : C2439336

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 900.00

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 38
<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. Ryan McGredy
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 318

City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer Moraga Travel, LLC	Occupation Owner	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
07 / 08 / 2013
Transaction ID : C2401941

Amount of Each Receipt this Period
25.00

B. Ryan McGredy
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 318

City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer Moraga Travel, LLC	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2013
Transaction ID : C2423765

Amount of Each Receipt this Period
25.00

C. Ryan McGredy
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 318

City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer Moraga Travel, LLC	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2013
Transaction ID : C2448122

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	75.00
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 38
<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. Ryan McGredy
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 318

City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer Moraga Travel, LLC	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
11 / 08 / 2013
Transaction ID : C2499825

Amount of Each Receipt this Period
250.00

B. Ryan McGredy
Full Name (Last, First, Middle Initial)
Mailing Address PO Box 318

City Moraga	State CA	Zip Code 94556
FEC ID number of contributing federal political committee. C		
Name of Employer Moraga Travel, LLC	Occupation Owner	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Date of Receipt
12 / 06 / 2013
Transaction ID : C2534123

Amount of Each Receipt this Period
25.00

C. Steve Orens
Full Name (Last, First, Middle Initial)
Mailing Address 16530 Ventura Blvd Suite 106

City Encino	State CA	Zip Code 91436-4571
FEC ID number of contributing federal political committee. C		
Name of Employer Plaza Travel	Occupation Vice President	
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Date of Receipt
08 / 12 / 2013
Transaction ID : C2423763

Amount of Each Receipt this Period
1000.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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: PAGE 18 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

A. Karl Rosen
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Felice Ct
 City State Zip Code
 Palm Desert CA 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Towne Centre Travel & Cruises Owner
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 07 / 08 / 2013
Transaction ID : C2401937
 Amount of Each Receipt this Period
 25.00

B. Karl Rosen
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Felice Ct
 City State Zip Code
 Palm Desert CA 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Towne Centre Travel & Cruises Owner
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : C2423761
 Amount of Each Receipt this Period
 25.00

C. Karl Rosen
 Full Name (Last, First, Middle Initial)
 Mailing Address 119 Felice Ct
 City State Zip Code
 Palm Desert CA 92211
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Towne Centre Travel & Cruises Owner
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : C2430955
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00
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: PAGE 19 OF 38
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL AGENTS PAC

Full Name (Last, First, Middle Initial)
A. Karl Rosen

Mailing Address 119 Felice Ct

City State Zip Code
Palm Desert CA 92211

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

Name of Employer Occupation
Towne Centre Travel & Cruises Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 11 / 2013
Transaction ID : C2448125

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
B. Karl Rosen

Mailing Address 119 Felice Ct

City State Zip Code
Palm Desert CA 92211

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

Name of Employer Occupation
Towne Centre Travel & Cruises Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 08 / 2013
Transaction ID : C2499826

Amount of Each Receipt this Period
25.00

Full Name (Last, First, Middle Initial)
C. Karl Rosen

Mailing Address 119 Felice Ct

City State Zip Code
Palm Desert CA 92211

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

Name of Employer Occupation
Towne Centre Travel & Cruises Owner

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 06 / 2013
Transaction ID : C2621931

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 75.00

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 38
	<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

Full Name (Last, First, Middle Initial)
A. Mary Louise Seifert

Mailing Address 4002 N 81st St

City State Zip Code
Scottsdale AZ 85251-4826

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

Name of Employer Occupation
Welcome Aboard Vacation Center, Inc. President

Receipt For: 2014
 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 / 02 / 2013
Transaction ID : C2621545

Amount of Each Receipt this Period
250.00

Full Name (Last, First, Middle Initial)
B. Anthony Shepherd

Mailing Address 515 Madison Ave

City State Zip Code
New York NY 10022

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

Name of Employer Occupation
Protravel International Information Requested

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 13 / 2013
Transaction ID : C2534139

Amount of Each Receipt this Period
300.00

Full Name (Last, First, Middle Initial)
C. Gregory Stewart

Mailing Address 5550 Lyndon B. Johnson Fwy
Suite 110

City State Zip Code
Dallas TX 75240

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

Name of Employer Occupation
Colwick Travel Corporation President

Receipt For: 2014
 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
11 / 08 / 2013
Transaction ID : C2499821

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional).....▶	1050.00
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 38
	<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. Matthew Upchurch
 Full Name (Last, First, Middle Initial)
 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 Virtuoso Occupation President & CEO
 Receipt For: 2012
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 16 / 2013
Transaction ID : C2410313
 Amount of Each Receipt this Period
 2000.00

B. Hope Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 E. Cottonwood Lane, Ste A
 City Casa Grande State AZ Zip Code 85122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADA Travel Occupation Owner/Manager
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 08 / 12 / 2013
Transaction ID : C2418008
 Amount of Each Receipt this Period
 30.00

C. Hope Wallace
 Full Name (Last, First, Middle Initial)
 Mailing Address 711 E. Cottonwood Lane, Ste A
 City Casa Grande State AZ Zip Code 85122
 FEC ID number of contributing federal political committee. **C**
 Name of Employer ADA Travel Occupation Owner/Manager
 Receipt For: 2014
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 09 / 13 / 2013
Transaction ID : C2430958
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....▶	2060.00
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 38
<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. Hope Wallace
Full Name (Last, First, Middle Initial)
Mailing Address 711 E. Cottonwood Lane, Ste A

City Casa Grande	State AZ	Zip Code 85122
---------------------	-------------	-------------------

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

Name of Employer ADA Travel	Occupation Owner/Manager
--------------------------------	-----------------------------

Receipt For: 2014
 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
10	/	11	/	2013

Transaction ID : C2448128

Amount of Each Receipt this Period

30.00

B. Hope Wallace
Full Name (Last, First, Middle Initial)
Mailing Address 711 E. Cottonwood Lane, Ste A

City Casa Grande	State AZ	Zip Code 85122
---------------------	-------------	-------------------

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

Name of Employer ADA Travel	Occupation Owner/Manager
--------------------------------	-----------------------------

Receipt For: 2014
 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
11	/	08	/	2013

Transaction ID : C2499828

Amount of Each Receipt this Period

30.00

c. Marilyn Zelaya
Full Name (Last, First, Middle Initial)
Mailing Address 1275 Lincoln Ave
suite 9

City San Jose	State CA	Zip Code 95125-3068
------------------	-------------	------------------------

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

Name of Employer Willow Glen Travel Agency	Occupation Manager
---	-----------------------

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	13	/	2013

Transaction ID : C2430954

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....▶	260.00
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: PAGE 23 OF 38
(check only one)

<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. Marilyn Zelaya
Full Name (Last, First, Middle Initial)

Mailing Address 1275 Lincoln Ave
suite 9

City San Jose State CA Zip Code 95125-3068

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

Name of Employer Willow Glen Travel Agency Occupation Manager

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **925.00**

Date of Receipt
M M / D D / Y Y Y Y Y Y
12 / 27 / 2013

Transaction ID : C2534157

Amount of Each Receipt this Period
225.00

B.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	225.00
TOTAL This Period (last page this line number only).....▶	13370.00

**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 24 OF 38
<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 AGENTS PAC

Full Name (Last, First, Middle Initial) A. Enterprise Rent-a-car Company Pac		Date of Receipt M M / D D / Y Y Y Y Y 08 / 15 / 2013 Transaction ID : C2621623
Mailing Address 600 Corporate Park Dr		Amount of Each Receipt this Period 2500.00
City Saint Louis	State MO	Zip Code 63105-4204
FEC ID number of contributing federal political committee. C C00219642	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

Full Name (Last, First, Middle Initial) B. Expedia PAC INC		Date of Receipt M M / D D / Y Y Y Y Y 08 / 08 / 2013 Transaction ID : C2622212
Mailing Address 333 108TH AVENUE NE		Amount of Each Receipt this Period 1000.00
City BELLEVUE	State WA	Zip Code 98004
FEC ID number of contributing federal political committee. C C00462879	Name of Employer	Occupation
Receipt For: 2014 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. Sabre Inc. Pac		Date of Receipt M M / D D / Y Y Y Y Y 07 / 22 / 2013 Transaction ID : C2401931
Mailing Address 1250 CONNECTICUT AVENUE NW SUITE 825		Amount of Each Receipt this Period 5000.00
City Washington	State DC	Zip Code 20036
FEC ID number of contributing federal political committee. C C00325811	Name of Employer	Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	

SUBTOTAL of Receipts This Page (optional).....▶	8500.00
TOTAL This Period (last page this line number only).....▶	8500.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		01		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153712

Amount of Each Disbursement this Period

11.10

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		31		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153713

Amount of Each Disbursement this Period

1.60

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153714

Amount of Each Disbursement this Period

33.05

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

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

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

45.75

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**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"/> 24	<input type="checkbox"/> 25	<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. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153715

Amount of Each Disbursement this Period

31.97

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153716

Amount of Each Disbursement this Period

16.80

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. American Society of Travel Agents

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		31		2013

Mailing Address 1101 King Street
Suite 200

City Alexandria State VA Zip Code 22314

Purpose of Disbursement
CC Processing Fee

Candidate Name

Category/
Type

Transaction ID : D153717

Amount of Each Disbursement this Period

1.50

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

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

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

50.27

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**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
12 / 24 / 2013

Transaction ID : D153719

Amount of Each Disbursement this Period

75.00

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Credit card fee refund

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 31 / 2013

Transaction ID : D153720

Amount of Each Disbursement this Period

-1.50

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
Refund for Aristotle Overcharges 2012-2013

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 25 / 2013

Transaction ID : D153721

Amount of Each Disbursement this Period

-381.27

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

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

-307.77

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 08 / 2013

Transaction ID : D147729

Amount of Each Disbursement this Period

22.50

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 19 / 2013

Transaction ID : D147730

Amount of Each Disbursement this Period

9.00

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
07 / 26 / 2013

Transaction ID : D147731

Amount of Each Disbursement this Period

5.00

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

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

36.50

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 02 / 2013

Transaction ID : D153671

Amount of Each Disbursement this Period

17.50

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 12 / 2013

Transaction ID : D153672

Amount of Each Disbursement this Period

87.75

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
08 / 16 / 2013

Transaction ID : D153673

Amount of Each Disbursement this Period

227.50

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

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

332.75

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 23 / 2013

Transaction ID : D153674

Amount of Each Disbursement this Period

61.75

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
08 / 30 / 2013

Transaction ID : D153675

Amount of Each Disbursement this Period

8.25

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2013

Transaction ID : D153676

Amount of Each Disbursement this Period

4.25

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

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

74.25

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 13 / 2013

Transaction ID : D153677

Amount of Each Disbursement this Period

19.25

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2013

Transaction ID : D153678

Amount of Each Disbursement this Period

2.50

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 27 / 2013

Transaction ID : D153679

Amount of Each Disbursement this Period

22.50

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

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

44.25

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 11 / 2013

Transaction ID : D153686

Amount of Each Disbursement this Period

23.75

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 18 / 2013

Transaction ID : D153687

Amount of Each Disbursement this Period

5.00

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 01 / 2013

Transaction ID : D153689

Amount of Each Disbursement this Period

7.75

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

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

36.50

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 08 / 2013

Transaction ID : D153690

Amount of Each Disbursement this Period

58.25

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 15 / 2013

Transaction ID : D153692

Amount of Each Disbursement this Period

7.50

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 06 / 2013

Transaction ID : D153694

Amount of Each Disbursement this Period

23.00

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

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

88.75

**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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		16		2013

Transaction ID : D153697

Amount of Each Disbursement this Period

20.25

Full Name (Last, First, Middle Initial)

B. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		13		2013

Transaction ID : D153707

Amount of Each Disbursement this Period

130.25

Full Name (Last, First, Middle Initial)

C. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
12		27		2013

Transaction ID : D153709

Amount of Each Disbursement this Period

105.25

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

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

255.75

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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"/> 24	<input type="checkbox"/> 25	<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. Aristotle, Inc.

Mailing Address 205 Pennsylvania Ave SE

City Washington State DC Zip Code 20003-1164

Purpose of Disbursement
CC Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			04			2013			

Transaction ID : D153711

Amount of Each Disbursement this Period

13.75

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

13.75

670.75

**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"/> 24	<input type="checkbox"/> 25	<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. 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: 2014
 Primary General
 Other (specify) ▼

State: HI District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			14			2013			

Transaction ID : D153556

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. TITUS FOR CONGRESS

Mailing Address PO BOX 72454

City LAS VEGAS State NV Zip Code 89170

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Dina Titus

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

Transaction ID : D153559

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LOBIONDO FOR CONGRESS

Mailing Address PO Box 550

City Vineland State NJ Zip Code 08362-0550

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Frank A. LoBiondo

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NJ District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

Transaction ID : D153557

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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**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"/> 24	<input type="checkbox"/> 25	<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. LEE TERRY FOR CONGRESS

Mailing Address PO BOX 540098

City OMAHA State NE Zip Code 68154

Purpose of Disbursement
Contribution to Committee 0

Candidate Name

Rep. Lee Terry

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NE District: 02

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 16 / 2013

Transaction ID : D147728

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. HUDSON FOR CONGRESS

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Richard Hudson

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NC District: 08

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
09 / 09 / 2013

Transaction ID : D153554

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FARR

Mailing Address 555 CAPITOL MALL, SUITE 1425

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement
Contribution to Committee

Candidate Name

Rep. Sam Farr

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 17

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
07 / 16 / 2013

Transaction ID : D147727

Amount of Each Disbursement this Period

1000.00

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

4500.00

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"/> 24	<input type="checkbox"/> 25	<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. FRIENDS OF JOHN THUNE

Mailing Address PO BOX 841

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
Contribution to Committee

Candidate Name

Sen. John Thune

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SD District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			12			2013			

Transaction ID : D153558

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF KELLY AYOTTE

Mailing Address PO BOX 937

City MANCHESTER State NH Zip Code 31050

Purpose of Disbursement
Contribution to Committee

Candidate Name

Sen. Kelly Ayotte

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NH District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			15			2013			

Transaction ID : D153560

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MARY LANDRIEU INC

Mailing Address 700 13TH STREET NW

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
Contribution to Committee

Candidate Name

Sen. Mary L. Landrieu

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			23			2013			

Transaction ID : D153555

Amount of Each Disbursement this Period

2500.00

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

10000.00

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

21500.00
