

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 AMERICAN SOCIETY OF TRAVEL AGENTS PAC

ADDRESS (number and street) 1101 King Street Suite 200 Alexandria VA 22314 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00114108 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31 Year-End Report (YE) (b) Monthly Report Due On: Feb 20 (M2), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), Jan 31 (YE) (c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S) (d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 11 / 25 / 2014 through 12 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Mrs. Deborah Mangas

Signature of Treasurer Mrs. Deborah Mangas [Electronically Filed] Date 01 / 29 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

**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="2014"/>	<input type="text"/>	<input type="text" value="186225.47"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="208937.77"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="2991.62"/>	<input type="text" value="80205.62"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="211929.39"/>	<input type="text" value="266431.09"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="215.50"/>	<input type="text" value="54717.20"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="211713.89"/>	<input type="text" value="211713.89"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

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).....	2035.00	51956.00
(ii) Unitemized	950.00	19743.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	2985.00	71699.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	8500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	2985.00	80199.00
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.).....	6.62	6.62
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))..... ▶	2991.62	80205.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	2991.62	80205.62

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	215.50	3717.20
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	215.50	3717.20
22. Transfers to Affiliated/Other Party Committees.....	0.00	3500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	47500.00
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)) ..	215.50	54717.20
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	215.50	54717.20

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)	2985.00	80199.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2985.00	80199.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	215.50	3717.20
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	215.50	3717.20

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 OF 13
(check only one)
 11a 11b 11c 12
 13 14 15 16 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. Philip Banks

Mailing Address 2929 Custer Rd. Suite #305

City State Zip Code
Plano TX 75075

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

Name of Employer Occupation
Legacy Travel, Inc. Travel Agent

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
 12 / 19 / 2014
Transaction ID : C2898740

Amount of Each Receipt this Period
250.00

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

Mailing Address 2495 Main St Ste 340

City State Zip Code
Buffalo NY 14214-2154

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

Name of Employer Occupation
The Travel Team, Inc/American Express 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
 12 / 04 / 2014
Transaction ID : C2880221

Amount of Each Receipt this Period
250.00

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

Mailing Address 2000 NE 59th Court

City State Zip Code
Fort Lauderdale FL 33308

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

Name of Employer Occupation
NACTA Director of Sales and Industry Relatio

Receipt For:
 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 / 11 / 2014
Transaction ID : C2887127

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 525.00

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

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Robert Duglin
Full Name (Last, First, Middle Initial)

Mailing Address 2000 NE 59th Court

City Fort Lauderdale State FL Zip Code 33308

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

Name of Employer NACTA Occupation Director of Sales and Industry Relatio

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 12 / 31 / 2014

Transaction ID : C2907231

Amount of Each Receipt this Period 25.00

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

Mailing Address 15 Prospect Ave

City Montclair State NJ Zip Code 07042

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

Name of Employer American Express Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 11 / 2014

Transaction ID : C2887132

Amount of Each Receipt this Period 100.00

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

Mailing Address 15 Prospect Ave

City Montclair State NJ Zip Code 07042

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

Name of Employer American Express Occupation Information Requested

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 12 / 31 / 2014

Transaction ID : C2907239

Amount of Each Receipt this Period 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 225.00

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 13
(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. Neal Kraemer

Mailing Address 6625 Lyndale Ave South
Suite 104

City State Zip Code
Minneapolis MN 55423-2373

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

Name of Employer Occupation
Carrousel Travel American Express Travel Agent

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
12 / 11 / 2014
Transaction ID : C2887134

Amount of Each Receipt this Period
250.00

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

Mailing Address 7208 Falls of Neuse
Suite 220

City State Zip Code
Raleigh NC 27615

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014
Transaction ID : C2887128

Amount of Each Receipt this Period
250.00

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

Mailing Address 7208 Falls of Neuse
Suite 220

City State Zip Code
Raleigh NC 27615

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
3000.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014
Transaction ID : C2907232

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: (check only one)	PAGE 9 OF 13
<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

Full Name (Last, First, Middle Initial) A. Doug Risser		Date of Receipt 12 / 31 / 2014 Transaction ID : C2907242
Mailing Address 3110 Marrard Ln		Amount of Each Receipt this Period 250.00
City Goshen	State IN	Zip Code 46526
FEC ID number of contributing federal political committee. C		
Name of Employer Menno Travel Service, Inc./ame	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. Laura Rodriguez		Date of Receipt 12 / 11 / 2014 Transaction ID : C2887125
Mailing Address 7035 S Central Ave Suite 4		Amount of Each Receipt this Period 25.00
City Phoenix	State AZ	Zip Code 85042-5465
FEC ID number of contributing federal political committee. C		
Name of Employer Marina Tours And Travel Arizona LLC	Occupation Owner/General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) c. Laura Rodriguez		Date of Receipt 12 / 31 / 2014 Transaction ID : C2907230
Mailing Address 7035 S Central Ave Suite 4		Amount of Each Receipt this Period 25.00
City Phoenix	State AZ	Zip Code 85042-5465
FEC ID number of contributing federal political committee. C		
Name of Employer Marina Tours And Travel Arizona LLC	Occupation Owner/General Manager	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional).....▶	300.00
TOTAL This Period (last page this line number only).....▶	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 13
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Patricia Tervola
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 Kapiolani Blvd
 Suite 900
 City Honolulu State HI Zip Code 96814-4529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vacations Hawaii Occupation Travel Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : C2887133
 Amount of Each Receipt this Period
 25.00

B. Patricia Tervola
 Full Name (Last, First, Middle Initial)
 Mailing Address 1585 Kapiolani Blvd
 Suite 900
 City Honolulu State HI Zip Code 96814-4529
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Vacations Hawaii Occupation Travel Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 31 / 2014
Transaction ID : C2907241
 Amount of Each Receipt this Period
 25.00

C. Duane 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 Treasurer
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **300.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 12 / 11 / 2014
Transaction ID : C2887131
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... **100.00**
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 11 OF 13
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Duane Wallace
Full Name (Last, First, Middle Initial)

Mailing Address 711 E. Cottonwood Lane, Ste A

City	State	Zip Code
Casa Grande	AZ	85122

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

Name of Employer	Occupation
ADA Travel	Treasurer

Receipt For:
 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	/	31	/	2014

Transaction ID : C2907238

Amount of Each Receipt this Period

50.00

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

Mailing Address 29 Plantation Park Dr Ste 104B

City	State	Zip Code
Bluffton	SC	29910-9010

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

Name of Employer	Occupation
Classic Travel	President

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1000.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	31	/	2014

Transaction ID : C2907243

Amount of Each Receipt this Period

85.00

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

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SUBTOTAL of Receipts This Page (optional).....▶	135.00
TOTAL This Period (last page this line number only).....▶	2035.00

**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. 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) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 04 / 2014

Transaction ID : D163037

Amount of Each Disbursement this Period

12.50

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) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 11 / 2014

Transaction ID : D163813

Amount of Each Disbursement this Period

120.75

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: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 19 / 2014

Transaction ID : D163839

Amount of Each Disbursement this Period

15.00

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

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

148.25

**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: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 29 / 2014

Transaction ID : D163855

Amount of Each Disbursement this Period

16.25

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: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : D163856

Amount of Each Disbursement this Period

5.50

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: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 31 / 2014

Transaction ID : D164419

Amount of Each Disbursement this Period

45.50

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

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

67.25

215.50