

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION

1. NAME OF COMMITTEE (in full) <b>American Society of Travel Agents PAC</b>		2. FEC IDENTIFICATION NUMBER <b>00114108</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1101 King Street</b>	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate committee. (See FEC FORM 1M)	
CITY, STATE and ZIP CODE <b>Alexandria, VA 22314</b>		

## 4. TYPE OF REPORT

(a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)  
 Termination Report

Monthly Report Due On:  
 February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31

Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>07/01/98</u> through <u>09/30/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 34,216.38
(b) Cash on Hand at Beginning of Reporting Period	\$ 43,344.62	
(c) Total Receipts (from line 19)	\$ 7,427.61	\$ 35,624.92
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 50,772.23	\$ 69,841.30
7. Total Disbursements (from Line 30)	\$ 12,934.88	\$ 32,003.93
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 37,837.35	\$ 37,837.37
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	

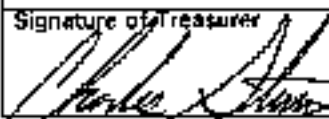
For further information:  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-219-3420

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

**Charles Sturm**

Signature of Treasurer



Date

10-6-98

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

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FEC FORM 3X

(Revised 9/93)

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE <b>American Society of Travel Agents PAC</b>	REPORT COVERING PERIOD	
	FROM: 07/01/98	TO: 09/30/98
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
<b>I. Receipts</b>		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
I. Itemized (Use Schedule A).....	500.00	1,050.00
II. Unitemized.....	6,740.00	34,025.00
III. Total..... (add i and ii) >	7,240.00	35,075.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions..... (add all, b and c) >	7,240.00	35,075.00
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.).....	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.).....	187.61	549.92
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	7,427.61	35,624.92
20. Total Federal Receipts..... (subtract line 18 from line 19) >	7,427.61	35,624.92
<b>II. Disbursements</b>		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	234.88	290.09
b. Other Federal Operating Expenditures.....	0.00	213.84
c. Total Operating Expenditures..... (Add a, ii, and b) >	234.88	503.93
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12,250.00	28,900.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (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. Individual/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 a, b, and c) >	0.00	0.00
29. Other Disbursements.....	450.00	2,600.00
30. Total Disbursements..... (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	12,934.88	32,003.93
31. Total Federal Disbursements..... (Subtract line 21 aii from line 30) >	12,700.00	31,713.84
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (Other than loans) (from line 11d).....	7,240.00	35,075.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32).....	7,240.00	35,075.00
35. Total Federal Operating Expenditures..... (add 21 ai and 21 b) >	0.00	213.84
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures..... (subtract line 36 from 35) >	0.00	213.84

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

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 or any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In full)  
 American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code <b>Carla J. Peterson</b> 234 North Third Avenue Sturgeon Bay, WI 54235-2418		Name of Employer <b>Door Travel Inc.</b>	Date (Month day, Year) <b>09/21/98</b>	Amount of Each Receipt this Period  <b>500.00</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation <b>Travel Agent</b>	Aggregate Year-to-date > \$ <b>500.00</b>	
B. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	
C. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	
D. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	
E. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	
F. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	
G. Full Name, Mailing Address and Zip Code		Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Occupation	Aggregate Year-to-date > \$	

SUB TOTAL of Receipts This Page (Optional).....> **500.00**

TOTAL this Period (Last page this line number only).....> **500.00**

**SCHEDULE A**

**ITEMIZED RECEIPTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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NAME OF COMMITTEE (in full)  
**American Society of Travel Agents FAC**

A. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	07/31/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		72.09
	434.40		
B. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	08/31/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		57.72
	492.12		
C. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation	09/30/98	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		57.80
	549.92		
D. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$		

SUB TOTAL of Receipts This Page (Optional) ..... > **187.61**

TOTAL this Period (Last page this line number only) ..... > **187.61**

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 21N

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (in Full)  
American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Riggs National Bank PO Box 96758 Washington, DC 20090-6758	operating expenses Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	08/31/98	234.88
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional) ..... > 234.88

TOTAL this Period (Last page this line number only) ..... > 234.88

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

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**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Duncan for Congress 6436 Scribner Court Friendship, MD 20758	John J. "Jimmy" Duncan, U.S. HOUSE 2nd TN Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/13/98	250.00
B. Full Name, Mailing Address and Zip Code Committee to Re-Elect J.D. Hayworth 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652	J.D. Hayworth, U.S. HOUSE 6th AZ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/13/98	500.00
C. Full Name, Mailing Address and Zip Code Aderholt for Congress PO Box 1158 HALEYVILLE, AL 35565	Robert B. Aderholt, U.S. HOUSE 4th AL Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/13/98	250.00
D. Full Name, Mailing Address and Zip Code Missourians for Kit Bond 507 Capitol Hill Court #100 Washington, DC 20002	Christopher S. Bond, U.S. SENATE MO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 2000	07/13/98	1,000.00
E. Full Name, Mailing Address and Zip Code Campbell Victory Fund 425 Second St., NE Washington, DC 20002	Nighhorse Campbell, CO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	500.00
F. Full Name, Mailing Address and Zip Code Friends of Conrad Burns P.O. Box 3311 Billings, MT 59103	Conrad Burns, U.S. SENATE MT Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	1,500.00
G. Full Name, Mailing Address and Zip Code Weller for Congress 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652	Gerald C. "Jerry" Weller, U.S. HOUSE 11th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	250.00
H. Full Name, Mailing Address and Zip Code Citizens for Bunning 1717 Dixie Highway Suite 180 Fort Wright, KY 41011	Jin Bunning, U.S. HOUSE 4th KY Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	300.00
I. Full Name, Mailing Address and Zip Code John McCain for Senate 507 Capital Court NE Suite 100 Washington, DC 20002	John McCain, U.S. SENATE AZ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	500.00

SUB TOTAL of Disbursements this page (Optional).....	5,050.00
TOTAL this Period (Last page this line number only).....	

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

**SCHEDULE B ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Bob Ostrom Department 103 3262 Superior Lane Bowie, MD 20715	Bob Ostrom, 5th MD Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	07/21/98	250.00
Todd Thabt for Congress 4451 Brookfield Corp. Dr., #200 Chantilly, VA 22021-1652	Todd Thabt, U.S. HOUSE 4th KS Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	08/31/98	200.00
People for Ganske 521 E. Locust, 2nd Floor Des Moines, IA 50309-1939	Greg Ganske, U.S. HOUSE 4th IA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	08/31/98	200.00
Friends of Senator D'Amato P.O. Box 3311 Mineola, NY 11501	Alfonse M. D'Amato, U.S. SENATE NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/03/98	200.00
Earl Pomeroy for Congress PO Box 75214 Washington, DC 20013-3042	Earl Pomeroy, U.S. HOUSE AL ND Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
Nussle for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Jim Nussle, U.S. HOUSE 2nd IA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	250.00
Brownback for U.S. Senate 425 Second Street, NE Washington, DC 20002	Sam Brownback, U.S. SENATE KS Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	300.00
Manzullo for Congress P.O. Box 7783 Rockford, IL 61126	Donald Manzullo, U.S. HOUSE 16th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
Friends of Byron Dorgan 420 C Street, NE Lower Level Washington, DC 20002	Byron Dorgan, U.S. SENATE ND Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	700.00

SUB TOTAL of Disbursements this page (Optional).....> 2,500.00

TOTAL this Period (Last page this line number only).....>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE	OF
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NAME OF COMMITTEE (in Full)  
**American Society of Travel Agents PAC**

A. Full Name, Mailing Address and Zip Code <b>J.C. Watts for Congress</b> PO Box 720445 Norman, OK 73070	Purpose of Disbursement <b>J.C. Watts, U.S. HOUSE 4th OK</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 300.00
B. Full Name, Mailing Address and Zip Code <b>Friends of Ray LaHood</b> 4451 Brookfield Corp. Dr. Ste. 200 Chantilly, VA 22021-1652	Purpose of Disbursement <b>Ray LaHood, U.S. HOUSE 18th IL</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 250.00
C. Full Name, Mailing Address and Zip Code <b>Ryan for Congress</b> PO Box 2774 Arlington, VA 22202	Purpose of Disbursement <b>Paul Ryan, U.S. HOUSE 1th WI</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 250.00
D. Full Name, Mailing Address and Zip Code <b>SNOWBARGER FOR CONGRESS</b> 1510 Woodbine St Alexandria, VA 22302	Purpose of Disbursement <b>Vince Snowbarger, U.S. HOUSE 3rd KS</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 250.00
E. Full Name, Mailing Address and Zip Code <b>Bob Filner for Congress</b> P.O. Box 127868 San Diego, CA 92112	Purpose of Disbursement <b>Bob Filner, U.S. HOUSE 50th CA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 250.00
F. Full Name, Mailing Address and Zip Code <b>Business Leaders Salute Faircloth</b> 507 Capitol Court, NE #100 Washington, DC 20002	Purpose of Disbursement <b>Lauch Faircloth, U.S. SENATE NC</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 250.00
G. Full Name, Mailing Address and Zip Code <b>Friends of Sherwood Boehlert</b> PO Box C Utica, NY 13503	Purpose of Disbursement <b>Sherwood Boehlert, U.S. HOUSE 23rd NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 500.00
H. Full Name, Mailing Address and Zip Code <b>TALENT FOR U S CONGRESS</b> PO Box 2776 Arlington, VA 22202	Purpose of Disbursement <b>James M. Talent, U.S. HOUSE 2nd MO</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 300.00
I. Full Name, Mailing Address and Zip Code <b>Frelinghuysen for Congress</b> PO Box 826 Morristown, NJ 07963	Purpose of Disbursement <b>Rodney Frelinghuysen, U.S. HOUSE 11th NJ</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	Date (Month day, Year) 09/17/98	Amount of Each Disb. this Period 200.00

SUB TOTAL of Disbursements this page (Optional).....>	2,550.00
TOTAL this Period (Last page this line number only).....>	



**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (in Full)  
American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>LoBiondo for Congress</b> PO Box 2776 Arlington, VA 22202	<b>Frank A. LoBiondo, U.S. HOUSE 2nd NJ</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>Bill Pascrell for Congress</b> 38 Ivy Street, SE Washington, DC 20003	<b>Bill Pascrell, U.S. HOUSE 8th NJ</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>PALLONE FOR CONGRESS</b> PO Box 3176 LONG BRANCH, NJ 07740	<b>Frank Pallone, U.S. HOUSE 6th NJ</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>STABENOW FOR CONGRESS</b> 436 New Jersey Ave, SE Washington, DC 20003	<b>Debbie Stabenow, U.S. HOUSE 8th MI</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>Andrews for Congress</b> 523 Richey Ave Callingswood, NJ 08108	<b>Robert E. Andrews, U.S. HOUSE 1st NJ</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>Gephardt for Congress</b> 530 Seventh St, SE Second Floor Washington, DC 20003	<b>Richard A. Gephardt, U.S. HOUSE 3rd MO</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	250.00
<b>Don Sherwood for Congress</b> 326 South State Street Clarks Summit, PA 18411	<b>Donald Sherwood, U.S. HOUSE 10th PA</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00
<b>Friends of Mike Forbes for Congress</b> P.O. Box 505 Farmingville, NY 11738	<b>Michael P. Forbes, U.S. HOUSE 1st NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	500.00
<b>Pete King for Congress Committee</b> PO Box 1428 Seaford, NY 11783	<b>Peter T. King, U.S. HOUSE 3rd NY</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	09/17/98	200.00

SUB TOTAL of Disbursements this page (Optional).....>	2,150.00
TOTAL this Period (Last page this line number only).....>	12,250.00

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)  
 American Society of Travel Agents PAC

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
Mark Ogles for State Senate 504 137th Street, East Bradenton, FL 34202	Mark Ogles, STATE HOUSE REP. FL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify)	07/13/98	250.00
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....>	250.00
TOTAL this Period (Last page this line number only).....>	250.00

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED <i>10-8-98</i>
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>Jm13</i> PREPARER	<i>10/13/98</i> DATE PREPARED