

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

JUL 24 11 27 AM '97

USE FEC MAILING LABEL
OR
TYPE OR PRINT

COMMITTEE IDENTIFICATION NUMBER: C00114108 060297 P 264

ROBERT A BURGE

AMERICAN SOCIETY OF TRAVEL AGE

NTS PAC

1101 KING STREET

ALEXANDRIA VA 22314

2. FEC IDENTIFICATION NUMBER
C00114108

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

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>01/01/97</u> through <u>06/30/97</u>			
6. (a)	Cash on Hand January 1, 19 <u>97</u>		\$ 21,593.83
(b)	Cash on Hand at Beginning of Reporting Period	\$ 21,593.83	
(c)	Total Receipts (from Line 19)	\$ 26,236.51	\$ 26,236.51
(d)	Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 47,830.34	\$ 47,830.34
7.	Total Disbursements (from Line 30)	\$ 17,656.95	\$ 17,656.95
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 8(d))	\$ 30,173.39	\$ 30,173.39
9.	Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9630 Local 202-219-3420
10.	Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	

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

Robert A. Burge

Signature of Treasurer



Date

7/12/97

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

FEC FORM 3X

(revised 9/93)

DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised 11/1/91

NAME OF COMMITTEE <i>American Society of Travel Agents PAC</i>	REPORT COVERING PERIOD	
	FROM: 01/01/97	TO: 06/30/97
	COLUMN A	COLUMN B
	Total This Period	Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
I. Itemized (Use Schedule A).....	3,250.00	3,250.00
II. Unitemized.....	22,650.00	22,650.00
III. Total..... (add i and ii) >	25,900.00	25,900.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions..... (add aiii, b and c) >	25,900.00	25,900.00
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.).....	336.51	336.51
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) >	26,236.51	26,236.51
20. Total Federal Receipts..... (subtract line 18 from line 19) >	26,236.51	26,236.51
II. Disbursements		
21. Operating Expenditures:		
a. Shared 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.....	281.95	281.95
c. Total Operating Expenditures..... (Add aI, aII, and b) >	281.95	281.95
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	17,375.00	17,375.00
24. Independent Expenditures (see Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C.441aldH) (see 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 a, b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Total Disbursements..... (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	17,656.95	17,656.95
31. Total Federal Disbursements..... (Subtract line 21 all from line 30) >	17,656.95	17,656.95
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans) (from line 11d).....	25,900.00	25,900.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans) (subtract line 33 from 32).....	25,900.00	25,900.00
35. Total Federal Operating Expenditures..... (add 21 aI and 21 b) >	281.95	281.95
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures..... (subtract line 36 from 35) >	281.95	281.95

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE	OF
1	2
FOR LINE NUMBER	
11 a i	

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 Marjorie Bowers 824 Orange Avenue Coronado, CA 92118	Name of Employer Certified Travel Consultants Occupation	Date (Month day, Year) 03/24/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
B. Full Name, Mailing Address and Zip Code Barbara Jenkins-Lee CTC 2673-F Via De La Valle Del Mar, CA 92014-1912	Name of Employer Rancho Del Mar Travel Occupation Travel Agent	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
C. Full Name, Mailing Address and Zip Code Jo Ann Askey CTC No. 333 4600 Lambert Street San Diego, CA 92109-3529	Name of Employer Runaway Tours, Inc. Occupation	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
D. Full Name, Mailing Address and Zip Code Caroline Prescott 4901 El Camino Real Carlsbad, CA 92008-3731	Name of Employer Carlsbad Travel Service Occupation	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
E. Full Name, Mailing Address and Zip Code Barbara Shartzler 869 Grand Avenue Carlsbad, CA 92008-1810	Name of Employer A Bit of Travel Occupation	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
F. Full Name, Mailing Address and Zip Code Jesse Bert 687 South Rancho Santa Fe Road San Marcos, CA 92069-3973	Name of Employer Getaway Travel Centre Occupation Travel Agent	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		
G. Full Name, Mailing Address and Zip Code Antoine Georges Suite 100 5703 Oberlin Drive San Diego, CA 92121	Name of Employer The Happy Traveler Occupation Travel Agent	Date (Month day, Year) 03/26/97	Amount of Each Receipt this Period 250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Aggregate Year-to-date > \$ 250.00		

SUB TOTAL of Receipts This Page (Optional).....>	1,750.00
TOTAL this Period (Last page this line number only).....>	

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 2 OF 2
FOR LINE NUMBER 11 a i

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
Lorene K. Stone Suite 14 2204 El Camino Real Oceanside, CA 92054-6306	Stuart Travel	03/27/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Travel Agent	Aggregate Year-to-date > \$	250.00
Joelyn Curtis CTC 941 Orange Avenue Coronado, CA 92118	Crown Travel	05/01/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Travel Agent	Aggregate Year-to-date > \$	250.00
Kaley Martinez CTC 906 Eolus Leucadia, CA 92024-2141	Focus on Travel	05/01/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Travel Agent	Aggregate Year-to-date > \$	250.00
Carol R. Georges Suite 100 5703 Obertin Drive San Diego, CA 92121-1743	The Happy Traveler	05/01/97	250.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation Travel Agent	Aggregate Year-to-date > \$	250.00
Ann Humberston 4929 Southwest 76th Avenue Portland, OR 97225-1805	Humberston's Cruise & Travel	05/23/97	500.00
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation	Aggregate Year-to-date > \$	500.00
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).....>	1,500.00
TOTAL this Period (Last page this line number only).....>	3,250.00

SCHEDULE A

ITEMIZED RECEIPTS

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

PAGE 1 OF 1
FOR LINE NUMBER 17

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

A. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
P. O. Box 11063 Church Station, NY 10249		05/30/97	117.55
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$		281.86	
B. Full Name, Mailing Address and Zip Code	Name of Employer	Date (Month day, Year)	Amount of Each Receipt this Period
P. O. Box 11063 Church Station, NY 10249		06/30/97	54.65
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Occupation		
Aggregate Year-to-date > \$		336.51	
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).....>	172.20
TOTAL this Period (Last page this line number only).....>	172.20

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE	OF
1	1
FOR LINE NUMBER	
21B	

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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 Disp. this Period
Riggs National Bank	taxes Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	02/28/97	142.40
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 Disp. 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 Disp. 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 Disp. 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 Disp. 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 Disp. 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 Disp. 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 Disp. 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 Disp. this Period

SUB TOTAL of Disbursements this page (Optional).....> **242.40**

TOTAL this Period (Last page this line number only).....> **242.40**

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
Billray for Congress 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652	Brian P. Billray, U.S. HOUSE 49th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	250.00
Friends of Sherwood Boehlert 1212 North Vernon Street Arlington, VA 22201	Sherwood Boehlert, U.S. HOUSE 23rd NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	300.00
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) 1998	02/11/97	500.00
Sam Brownback for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Sam Brownback, U.S. HOUSE 2nd KS Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	300.00
Citizens for Bunning 1717 Dixie Highway Suite 180 Fort Wright, KY 41011	Jim Bunning, U.S. HOUSE 4th KY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	150.00
Jon Christensen for Congress P.O. Box 540621 Omaha, NE 68154-0621	Jon Christensen, U.S. HOUSE 2nd NE Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/11/97	200.00
Friends of Max Cleland 3146 NE Expressway Atlanta, GA 30341	Max Cleland, U.S. SENATE GA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/11/97	500.00
Collins for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Mac Collins, U.S. HOUSE 3rd GA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	250.00
Christopher Cox Congressional Committee P.O. Box 8088-C Newport Beach, CA 92658	Christopher Cox, U.S. HOUSE 47th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	300.00

SUB TOTAL of Disbursements this page (Optional)..... > 2,850.00

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 2 OF 5
FOR LINE NUMBER 23

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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	05/22/97	300.00
B. Full Name, Mailing Address and Zip Code Republican National Committee 310 First Street, S.E. Washington, DC 20003	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1997	05/22/97	5,000.00
C. Full Name, Mailing Address and Zip Code Team Emerson P.O. Box 822 Cape Girardeau, MO 63702-0822	Purpose of Disbursement Jo Ann Emerson, U.S. HOUSE 8th MO Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	200.00
D. Full Name, Mailing Address and Zip Code People for English 208 G Street, NE Washington, DC 20002	Purpose of Disbursement Phil English, U.S. HOUSE 21st PA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/11/97	200.00
E. Full Name, Mailing Address and Zip Code Faircloth for Senate P.O. Box 26585 Raleigh, NC 27611	Purpose of Disbursement Lauch Faircloth, U.S. SENATE NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	250.00
F. Full Name, Mailing Address and Zip Code Friends of Furr Committee 635-B Pennsylvania Avenue, SE Washington, DC 20003	Purpose of Disbursement Sam Furr, U.S. HOUSE 17th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	200.00
G. Full Name, Mailing Address and Zip Code Bob Filner for Congress P.O. Box 127868 San Diego, CA 92112	Purpose of Disbursement Bob Filner, U.S. HOUSE 50th CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	125.00
H. Full Name, Mailing Address and Zip Code Friends of Mark Foley 1951 Biltmore St., NW Suite 3 Washington, DC 20009	Purpose of Disbursement Mark Foley, U.S. HOUSE 16th FL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	250.00
I. Full Name, Mailing Address and Zip Code Jim Gibbons for Congress c/o 811 Chetworth Place Alexandria, VA 22314	Purpose of Disbursement Jim Gibbons, U.S. HOUSE 2nd NV Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	300.00

SUB TOTAL of Disbursements this page (Optional)..... > 6,825.00

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 3 OF 5
FOR LINE NUMBER 23

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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
Judd Gregg Committee P.O. Box 1812 Concord, NH 03302	Judd Gregg, U.S. SENATE NH Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/11/97	500.00
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	04/04/97	300.00
C. Full Name, Mailing Address and Zip Code Helms for Senate 425 Second Street Washington, DC 20002	Jesse Helms, U.S. SENATE NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	300.00
D. Full Name, Mailing Address and Zip Code Friends for Houghton 4451 Brookfield Corp Dr. Suite 200 Chantilly, VA 22021-1652	Anno Houghton, U.S. HOUSE 31st NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	300.00
E. Full Name, Mailing Address and Zip Code Hulshof for Congress P.O. Box 16021 Alexandria, VA 22302	Kenny Hulshof, U.S. HOUSE 9th MD Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	250.00
F. Full Name, Mailing Address and Zip Code Hunter for Congress 320 First Street, SE Washington, DC 20003	Duncan Hunter, U.S. HOUSE 52nd CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	250.00
G. Full Name, Mailing Address and Zip Code Hyde for Congress Committee P.O. Box 332 Des Plaines, IL 60016	Henry J. Hyde, U.S. HOUSE 6th IL Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	200.00
H. Full Name, Mailing Address and Zip Code Istook for Congress Committee 5400 N. Grand Boulevard Ste. 100-G Oklahoma City, OK 73112	Ernest Jim Istook, U.S. HOUSE 5th OK Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	300.00
I. Full Name, Mailing Address and Zip Code Re-Elect Nancy Johnson 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652	Nancy L. Johnson, U.S. HOUSE 6th CT Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	500.00

SUB TOTAL of Disbursements this page (Optional).....> 3,900.00

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 4 OF 5
FOR LINE NUMBER 23

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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
Jay Johnson for Congress Committee P.O. Box 75214 Washington, DC 20013-5214	Jay W. Johnson, U.S. HOUSE 9th WI Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	200.00
Walter B. Jones for Congress Committee P.O. Box 99667 Raleigh, NC 27624	Walter B. Jones, U.S. HOUSE 3rd NC Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	02/11/97	200.00
Sue Kelly for Congress P.O. Box 491 Old West Point Road Cornwall on Hudson, NY 12520	Sue W. Kelly, U.S. HOUSE 19th NY Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	250.00
Jay Kim for Congress 4451 Brookfield Corp Dr. Suite 200 Chantilly, VA 22021-1652	Jay C. Kim, U.S. HOUSE 41st CA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	200.00
Jim Kolbe '98 Committee 4010 Franconia Road Alexandria, VA 22310	Jim Kolbe, U.S. HOUSE 5th AZ Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	300.00
Trent Lott for Mississippi P.O. Box 228224 Jackson, MS 39225	Trent Lott, U.S. SENATE MS Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	05/22/97	500.00
Jim McCrery for Congress Committee 4010 Franconia Road Alexandria, VA 22310-2136	Jim McCrery, U.S. HOUSE 5th LA Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/04/97	300.00
Frank H. Murkowski '98 2300 Clarendon Blvd. Suite 1010 Arlington, VA 22201	Frank H. Murkowski, U.S. SENATE AK Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998	04/23/97	300.00
Jim 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	04/04/97	500.00

SUB TOTAL of Disbursements this page (Optional).....> 3,750.00

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

<p>A. Full Name, Mailing Address and Zip Code Pastor for Arizona P.O. Box 2884 Washington, DC 20013</p>	<p>Purpose of Disbursement Ed Pastor, U.S. HOUSE 2nd AZ</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 05/22/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>B. Full Name, Mailing Address and Zip Code Jim Ramstad Volunteer Committee 8100 Penn Avenue South Suite 104 Bloomington, MN 55431-1325</p>	<p>Purpose of Disbursement Jim Ramstad, U.S. HOUSE 3rd MN</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 05/22/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>C. Full Name, Mailing Address and Zip Code Friends of John Warner '96 Committee 425 Second Street, NE Washington, DC 20002</p>	<p>Purpose of Disbursement John W. Warner, 1st VA</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 05/22/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>D. Full Name, Mailing Address and Zip Code Watkins for Congress P.O. Box WW Stillwater, OK 74076-9946</p>	<p>Purpose of Disbursement Wes Watkins, U.S. HOUSE 3rd OK</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 05/22/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>E. Full Name, Mailing Address and Zip Code J.C. Watts for Congress in '96 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652</p>	<p>Purpose of Disbursement J.C. Watts, U.S. HOUSE 4th OK</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 04/23/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>F. Full Name, Mailing Address and Zip Code Weller for Congress 4451 Brookfield Corp. Dr. Suite 200 Chantilly, VA 22021-1652</p>	<p>Purpose of Disbursement Gerald C. Jerry Weller, U.S. HOUSE 11th IL</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 04/23/97</p>	<p>Amount of Each Disb. this Period 250.00</p>
<p>G. Full Name, Mailing Address and Zip Code Alaskans for Don Young 2300 Clarendon Blvd. Ste. 1010 Arlington, VA 22201</p>	<p>Purpose of Disbursement Don Young, U.S. HOUSE AL AK</p> <p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) 1998</p>	<p>Date (Month day, Year) 04/04/97</p>	<p>Amount of Each Disb. this Period 300.00</p>
<p>H. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>
<p>I. Full Name, Mailing Address and Zip Code</p>	<p>Purpose of Disbursement</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)</p>	<p>Date (Month day, Year)</p>	<p>Amount of Each Disb. this Period</p>

SUB TOTAL of Disbursements this page (Optional) > **2,050.00**

TOTAL this Period (Last page this line number only) > **17,375.00**

