

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 ADVISORS, INC. PAC

ADDRESS (number and street) **675 NORTH WASHINGTON STREET**
SUITE 490
 Check if different than previously reported. (ACC) **ALEXANDRIA VA 22314**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲
C C00114108 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report (Q1)
 July 15 Quarterly Report (Q2)
 October 15 Quarterly Report (Q3)
 January 31 Year-End Report (YE)
 July 31 Mid-Year Report (Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day PRE-Election Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (12S)
Election on / / in the State of
(d) 30-Day POST-Election Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on / / in the State of

5. Covering Period / / 2022 through / / 2022

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

Signature of Treasurer Peck, Eben, , , [Electronically Filed] Date / / 2022

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. 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="2022"/>		378490.34
(b) Cash on Hand at Beginning of Reporting Period.....	378490.34	
(c) Total Receipts (from Line 19)	5182.06	5182.06
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	383672.40	383672.40
7. Total Disbursements (from Line 31).....	32933.99	32933.99
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	350738.41	350738.41
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

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. 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).....	4894.96	4894.96
(ii) Unitemized	5109.62	5109.62
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	10004.58	10004.58
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	10004.58	10004.58
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.).....	- 4822.52	- 4822.52
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)).....▶	5182.06	5182.06
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	5182.06	5182.06

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	433.99	433.99
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	433.99	433.99
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	26500.00	26500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	6000.00	6000.00
30. Federal Election Activity (52 U.S.C. § 30101(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)) ..	32933.99	32933.99
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	32933.99	32933.99

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

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)	10004.58	10004.58
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	10004.58	10004.58
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	433.99	433.99
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	433.99	433.99

**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 21
	<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	

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 ADVISORS, INC. PAC

A. Ardis, Rick, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 229 Paterson Avenue
Suite 1

City East Rutherford State NJ Zip Code 07073

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

Name of Employer (for Individual) Ardis Travel Occupation (for Individual) General Manger

Receipt For: 2022
 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
 01 / 27 / 2022

Transaction ID : SA11AI.12051

Amount of Each Receipt this Period
500.00

Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6565 N. MacArthur Blvd
Suite 400

City Irving State TX Zip Code 75039

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

Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2022

Transaction ID : SA11AI.12029

Amount of Each Receipt this Period
417.00

Memo Item

C. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6565 N. MacArthur Blvd
Suite 400

City Irving State TX Zip Code 75039

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

Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
834.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2022

Transaction ID : SA11AI.12068

Amount of Each Receipt this Period
417.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1334.00
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 21
	<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 ADVISORS, INC. PAC

A. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 6565 N. MacArthur Blvd
Suite 400

City Irving State TX Zip Code 75039

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

Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2022

Transaction ID : SA11AI.12157

Amount of Each Receipt this Period
417.00

Memo Item

B. Green, Steven, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 816 Cinnaminson Ave

City Palmyra State NJ Zip Code 08065

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

Name of Employer (for Individual) Mayfair Travel Occupation (for Individual) Vice President

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
256.41

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 21 / 2022

Transaction ID : SA11AI.12172

Amount of Each Receipt this Period
256.41

Memo Item

C. Hale, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora State CO Zip Code 80011

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

Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor

Receipt For: 2022
 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
 01 / 19 / 2022

Transaction ID : SA11AI.12039

Amount of Each Receipt this Period
225.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	898.41
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 8 OF 21
	<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 ADVISORS, INC. PAC

A. Hale, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 19 / 2022
Transaction ID : SA11AI.12084
 Amount of Each Receipt this Period
 225.00
 Memo Item

B. Hale, Lisa, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 19 / 2022
Transaction ID : SA11AI.12167
 Amount of Each Receipt this Period
 225.00
 Memo Item

C. Hale, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 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
 01 / 29 / 2022
Transaction ID : SA11AI.12061
 Amount of Each Receipt this Period
 225.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	675.00
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 21
	<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 ADVISORS, INC. PAC

A. Hale, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 28 / 2022
Transaction ID : SA11AI.12096
 Amount of Each Receipt this Period
 225.00
 Memo Item

B. Hale, Robert, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 15285 E 7th Circle
 City Aurora State CO Zip Code 80011
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 28 / 2022
Transaction ID : SA11AI.12184
 Amount of Each Receipt this Period
 225.00
 Memo Item

C. Kimi, Ken, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1654 Onipaa Street
 City Honolulu State HI Zip Code 96819
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) A Touch Above Travel Services Occupation (for Individual) Travel Advisor
 Receipt For: 2022
 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
 02 / 11 / 2022
Transaction ID : SA11AI.12070
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	700.00
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 21
<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 ADVISORS, INC. PAC

A. Lee, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1100 Erie Ct
 City Winter Springs State FL Zip Code 32708-5513
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing
 Receipt For: 2022
 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
 03 / 26 / 2022
Transaction ID : SA11AI.12181
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Meader, Mark, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1533 Independence Avenue SE
 City Washington State DC Zip Code 20003-1548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Amer. Soc. of Travel Advisors Occupation (for Individual) SVP Industry Affairs
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 255.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 23 / 2022
Transaction ID : SA11AI.12174
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. Paugh, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 US Hwy 1 Ste 6
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All About You Travel Unlmted Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 24 / 2022
Transaction ID : SA11AI.12090
 Amount of Each Receipt this Period
 102.56
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	287.56
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 21
	<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 ADVISORS, INC. PAC

A. Paugh, Jean, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1240 US Hwy 1 Ste 6
 City Rockledge State FL Zip Code 32955
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) All About You Travel Unlimited Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 03 / 24 / 2022
Transaction ID : SA11AI.12179
 Amount of Each Receipt this Period 102.56
 Memo Item

B. Phillips, Shelly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 11929 Hearthstone Lane
 City Birmingham State AL Zip Code 35111
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel by That Girl Occupation (for Individual) Independent Agent
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 276.91

Date of Receipt 02 / 15 / 2022
Transaction ID : SA11AI.12079
 Amount of Each Receipt this Period 128.20
 Memo Item

C. Sinclair, Susan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 37 US Hwy 46
 City Hackettstown State NJ Zip Code 07840-2733
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Skyland World Travel Occupation (for Individual) Owner
 Receipt For: 2022
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt 01 / 26 / 2022
Transaction ID : SA11AI.12049
 Amount of Each Receipt this Period 512.82
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	743.58
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 21
<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 ADVISORS, INC. PAC

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Takushi, Katherine, , ,

Mailing Address **PO Box 1204**

City Haiku	State HI	Zip Code 96708
----------------------	--------------------	--------------------------

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

Name of Employer (for Individual) Captivating Journeys	Occupation (for Individual) Owner
--	---

Receipt For: 2022
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **256.41**

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	05	/	2022

Transaction ID : SA11AI.12065

Amount of Each Receipt this Period

256.41

 Memo Item

B. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

--

 Memo Item

C. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual)	Occupation (for Individual)
-----------------------------------	-----------------------------

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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 Memo Item

SUBTOTAL of Receipts This Page (optional).....	256.41
TOTAL This Period (last page this line number only).....	4894.96

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 OF 21
(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 ADVISORS, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
A. California Financial Partners

Mailing Address 700 N Brand Blvd
#640

City Glendale State CA Zip Code 91203

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

Name of Employer (for Individual) Occupation (for Individual)

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
- 4822.53

Date of Receipt
M M / D D / Y Y Y Y Y Y
03 / 31 / 2022

Transaction ID : SA17.12362

Amount of Each Receipt this Period
- 4822.53

Memo Item
Interest/Dividends Income plus Unrealized Loss on Investments

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
B.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
C.

Mailing Address

City State Zip Code

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

Name of Employer (for Individual) Occupation (for Individual)

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

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	- 4822.53
TOTAL This Period (last page this line number only).....▶	- 4822.53

**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"/> 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 ADVISORS, INC. PAC

A. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 01 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.12196

Amount of Each Disbursement this Period: 85.33

Memo Item

B. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 02 / 28 / 2022

FEC Identification Number: C

Transaction ID : SB21B.12197

Amount of Each Disbursement this Period: 72.23

Memo Item

C. PNC Bank NA

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement: 03 / 31 / 2022

FEC Identification Number: C

Transaction ID : SB21B.12198

Amount of Each Disbursement this Period: 82.73

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	240.29
TOTAL This Period (last page this line number only).....▶	240.29

**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"/> 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 ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial) A. AMODEI FOR NEVADA		Date of Disbursement MM / DD / YYYY 02 / 04 / 2022
Mailing Address 503 N DIVISION ST		FEC Identification Number C00496760 Transaction ID : SB23.12202
City CARSON CITY	State NV	Zip Code 89703
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name AMODEI, MARK EUGENE, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: NV	District: 02	

Full Name (Last, First, Middle Initial) B. CASE FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 29 / 2022
Mailing Address PO BOX 2941		FEC Identification Number C00680918 Transaction ID : SB23.12361
City HONOLULU	State HI	Zip Code 96802
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name CASE, EDWARD, , ,		Amount of Each Disbursement this Period 1000.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: HI	District: 01	

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOHN THUNE		Date of Disbursement MM / DD / YYYY 02 / 04 / 2022
Mailing Address PO BOX 841		FEC Identification Number C00409581 Transaction ID : SB23.12201
City SIOUX FALLS	State SD	Zip Code 57101
Purpose of Disbursement Contribution to Candidate Committee		011 Category/ Type
Candidate Name THUNE, JOHN R., , ,		Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: SD	District: 00	

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

3500.00

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"/> 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 ADVISORS, INC. 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 Candidate Committee

Category/
Type

Candidate Name
THUNE, JOHN R., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: SD District: 00

Date of Disbursement
MM / DD / YYYY
03 / 09 / 2022

FEC Identification Number
C C00409581
Transaction ID : SB23.12214
Amount of Each Disbursement this Period
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JIMMY PANETTA FOR CONGRESS

Mailing Address PO BOX 103

City CARMEL VALLEY State CA Zip Code 93924

Purpose of Disbursement
Contribution to Candidate Committee

Category/
Type

Candidate Name
PANETTA, JIMMY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CA District: 19

Date of Disbursement
MM / DD / YYYY
01 / 24 / 2022

FEC Identification Number
C C00592154
Transaction ID : SB23.12199
Amount of Each Disbursement this Period
1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LAHOOD FOR CONGRESS

Mailing Address P.O. BOX 10735

City PEORIA State IL Zip Code 61612

Purpose of Disbursement
Contribution to Candidate Committee

Category/
Type

Candidate Name
LAHOOD, DARIN MCKAY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: IL District: 16

Date of Disbursement
MM / DD / YYYY
02 / 01 / 2022

FEC Identification Number
C C00575050
Transaction ID : SB23.12217
Amount of Each Disbursement this Period
1500.00

Memo Item

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

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

4000.00

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)

Grid for line numbers: 21b, 22, 23, 26, 27, 28a, 28b, 28c, 29, 30b. Line 23 is checked.

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Form A: LISA MURKOWSKI FOR US SENATE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement (1500.00).

Form B: LISA MURKOWSKI FOR US SENATE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement (1000.00).

Form C: LISA MURKOWSKI FOR US SENATE. Includes fields for Full Name, Mailing Address, City, State, Zip Code, Purpose of Disbursement, Candidate Name, Office Sought, Disbursement For, Date of Disbursement, FEC Identification Number, Transaction ID, and Amount of Each Disbursement (500.00).

SUBTOTAL of Disbursements This Page (optional) 3000.00
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"/> 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 ADVISORS, INC. PAC

A. MAGGIE FOR NH

Full Name (Last, First, Middle Initial)
Maggie For NH

Mailing Address PO BOX 298

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
HASSAN, MARGARET WOOD, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: NH District: 00

Date of Disbursement: 03 / 02 / 2022

FEC Identification Number: C00588772
Transaction ID : SB23.12211
Amount of Each Disbursement this Period: 1000.00

Memo Item

B. MARSHA FOR SENATE

Full Name (Last, First, Middle Initial)
Marsha For Senate

Mailing Address PO BOX 3750

City BRENTWOOD State TN Zip Code 37024

Purpose of Disbursement
Contribution for Candidate Committee

Candidate Name
BLACKBURN, MARSHA MRS., , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: TN District: 00

Date of Disbursement: 03 / 17 / 2022

FEC Identification Number: C00376939
Transaction ID : SB23.12220
Amount of Each Disbursement this Period: 1000.00

Memo Item

C. MORAN VICTORY COMMITTEE

Full Name (Last, First, Middle Initial)
Moran Victory Committee

Mailing Address PO BOX 541

City BELLEVILLE State KS Zip Code 66935

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name
MORAN, JERRY, , ,

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼

State: KS District: 00

Date of Disbursement: 02 / 04 / 2022

FEC Identification Number: S0KS00091
Transaction ID : SB23.12205
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

3000.00

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"/> 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 ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. NEW DEMOCRAT COALITION ACTION FUND

Mailing Address 233 PENNSYLVANIA AVE SE

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution to Political Action Committee

011

Category/
Type

Candidate Name

NEW DEMOCRAT COALITION ACTION FUND

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 09 / 2022

FEC Identification Number

C C00409730

Transaction ID : SB23.12216

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. NUTMEG PAC

Mailing Address C/O CACACE TUSCH & SANTAGATA
777 SUMMER ST

City
STAMFORD

State
CT

Zip Code
06901

Purpose of Disbursement
Contribution to Candidate Committee

011

Category/
Type

Candidate Name

NUTMEG PAC

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: District:

Date of Disbursement

MM / DD / YYYY
03 / 08 / 2022

FEC Identification Number

C C00492983

Transaction ID : SB23.12024

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. SALAZAR FOR CONGRESS

Mailing Address 3725 WEST FLAGLER STREET
#281

City
MIAMI

State
FL

Zip Code
33134

Purpose of Disbursement
Contribution to Candidate Committee

011

Category/
Type

Candidate Name

SALAZAR, MARIA ELVIRA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: FL District: 27

Date of Disbursement

MM / DD / YYYY
03 / 29 / 2022

FEC Identification Number

C C00714261

Transaction ID : SB23.12353

Amount of Each Disbursement this Period

500.00

Memo Item

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

6500.00

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"/> 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 ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. SMART SOLUTIONS PAC

Mailing Address 611 PENNSYLVANIA AVE SE
UNIT 143

City
WASHINGTON

State
DC

Zip Code
20003

Purpose of Disbursement
Contribution to Candidate Committee

011

Category/
Type

Candidate Name

SMART SOLUTIONS PAC

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 29 / 2022

FEC Identification Number

C C00654475

Transaction ID : SB23.12351

Amount of Each Disbursement this Period

2500.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TIM SCOTT FOR SENATE

Mailing Address 1405 ASHLEY RIVER RD

City
CHARLESTON

State
SC

Zip Code
29407

Purpose of Disbursement
Contribution to Candidate Committee

011

Category/
Type

Candidate Name

SCOTT, TIMOTHY E., , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify)

State: SC District: 00

Date of Disbursement

M M / D D / Y Y Y Y Y Y
02 / 16 / 2022

FEC Identification Number

C C00540302

Transaction ID : SB23.12206

Amount of Each Disbursement this Period

1500.00

Memo Item

Full Name (Last, First, Middle Initial)

C. VICTORIA SPARTZ FOR CONGRESS

Mailing Address PO BOX 505

City
NOBLESVILLE

State
IN

Zip Code
46061

Purpose of Disbursement
Contribution to Candidate Committee

011

Category/
Type

Candidate Name

SPARTZ, VICTORIA, , ,

Office Sought: House
 Senate
 President

Disbursement For: 2022
 Primary General
 Other (specify) ▼

State: IN District: 05

Date of Disbursement

M M / D D / Y Y Y Y Y Y
03 / 29 / 2022

FEC Identification Number

C C00737767

Transaction ID : SB23.12357

Amount of Each Disbursement this Period

2500.00

Memo Item

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

6500.00

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

26500.00

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 type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name (Last, First, Middle Initial)

A. Friends of Jay Ellenby

Mailing Address 126 S. Main Street
Lower Level

City Bel Air State MD Zip Code 21014

Purpose of Disbursement
Nonfederal contribution

Category/
Type

Candidate Name
Ellenby, Jay, , ,

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement
M M / D D / Y Y Y Y Y Y
02 / 22 / 2022

FEC Identification Number

Transaction ID : SB29.12234
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

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 Y Y

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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