

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 ALEXANDRIA VA 22314 Check if different than previously reported. (ACC)

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

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

5. Covering Period 01 / 01 / 2019 through 06 / 30 / 2019

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 07 / 31 / 2019

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="2019"/>	<input type="text" value="296423.27"/>	<input type="text" value="296423.27"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="296423.27"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="93775.42"/>	<input type="text" value="93775.42"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="390198.69"/>	<input type="text" value="390198.69"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="110225.23"/>	<input type="text" value="110225.23"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="279973.46"/>	<input type="text" value="279973.46"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

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).....	79819.55	79819.55
(ii) Unitemized	13432.94	13432.94
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	93252.49	93252.49
(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)	93252.49	93252.49
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.).....	522.93	522.93
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)).....▶	93775.42	93775.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	93775.42	93775.42

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	7725.23	7725.23
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	7725.23	7725.23
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	102500.00	102500.00
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).....	0.00	0.00
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)) ..	110225.23	110225.23
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110225.23	110225.23

DETAILED SUMMARY PAGE
of Disbursements

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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)	93252.49	93252.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	93252.49	93252.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	7725.23	7725.23
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	7725.23	7725.23

**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 42
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

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

A. Ardis, Ricky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Mozart St
 City East Rutherford State NJ Zip Code 07073-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) Travel Agent
 Receipt For: 2020
 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
 02 / 06 / 2019
Transaction ID : SA11AI.5790
 Amount of Each Receipt this Period
 500.00
 Memo Item

B. Ardis, Ricky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Mozart St
 City East Rutherford State NJ Zip Code 07073-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) Travel Agent
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2019
Transaction ID : SA11AI.5746
 Amount of Each Receipt this Period
 150.00
 Memo Item

C. Ardis, Ricky, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 93 Mozart St
 City East Rutherford State NJ Zip Code 07073-1369
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ardis Travel Occupation (for Individual) Travel Agent
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2019
Transaction ID : SA11AI.5783
 Amount of Each Receipt this Period
 350.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1000.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 OF 42
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Banks, Philip, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 3400 Preston Rd.
#235

City Plano	State TX	Zip Code 75093-7468
---------------	-------------	------------------------

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

Name of Employer (for Individual) Legacy Travel, Inc.	Occupation (for Individual) President and Co-Founder
--	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2019

Transaction ID : SA11AI.5808

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 250 Moonachie Road
Suite 300

City Moonachie	State NJ	Zip Code 07074
-------------------	-------------	-------------------

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

Name of Employer (for Individual) Central Holidays	Occupation (for Individual) National Sales Manager
---	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		18		2019

Transaction ID : SA11AI.5804

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 204 Martroy Ln

City Wallingford	State PA	Zip Code 19086-6314
---------------------	-------------	------------------------

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

Name of Employer (for Individual) Avenue Two Travel	Occupation (for Individual) CEO
--	------------------------------------

Receipt For: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		03		2019

Transaction ID : SA11AI.5841

Amount of Each Receipt this Period
5000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	7000.00
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 8 OF 42
<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. Casto, Marc, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1491 Hamilton Way
 City San Jose State CA Zip Code 95125-4440
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Casto Travel Occupation (for Individual) President & CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 14 / 2019
Transaction ID : SA11AI.5807
 Amount of Each Receipt this Period
 1000.00
 Memo Item

B. Chapin, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 950 N Michigan Avenue Apt. 3604
 City Chicago State IL Zip Code 60611-4508
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ensemble Occupation (for Individual) Travel Agent
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1029.86

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2019
Transaction ID : SA11AI.5813
 Amount of Each Receipt this Period
 1029.86
 Memo Item

C. Cochrane, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 425 E Statesville Ave Suite 101
 City Mooresville State NC Zip Code 28115
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Gifted Travel Network, Inc. Occupation (for Individual) Co-Founder & COO
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2019
Transaction ID : SA11AI.5842
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	7029.86
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 42
<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. Coyle, Bill, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7219 Roaring Springs Dr
 City Austin State TX Zip Code 78736
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Encompass the World Occupation (for Individual) Travel Agent
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt **06 / 03 / 2019**
Transaction ID : SA11AI.5810
 Amount of Each Receipt this Period 1000.00
 Memo Item

B. Dane, Christopher, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Knolls Lane
 City Manhasset State NY Zip Code 11030
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Hickory Global Partners, LLC Occupation (for Individual) President
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt **02 / 13 / 2019**
Transaction ID : SA11AI.5781
 Amount of Each Receipt this Period 300.00
 Memo Item

C. da Rosa, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5414 Oberlin St. 300
 City San Diego State CA Zip Code 92121-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Balboa Travel, Inc. Occupation (for Individual) Strategic Solutions Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt **05 / 13 / 2019**
Transaction ID : SA11AI.5795
 Amount of Each Receipt this Period 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1800.00
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 42
<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
da Rosa, Andrea, , ,

Mailing Address 5414 Oberlin St.
300

City San Diego State CA Zip Code 92121-4744

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

Name of Employer (for Individual) Balboa Travel, Inc. Occupation (for Individual) Strategic Solutions Manager

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2019

Transaction ID : SA11AI.5832

Amount of Each Receipt this Period
4500.00

Memo Item

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

Mailing Address 6564 N MacArthur Blvd
Ste 400

City Irving State TX Zip Code 75039

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

Name of Employer (for Individual) Travelink/American Express Occupation (for Individual) President

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2574.66

Date of Receipt
MM / DD / YYYY
03 / 20 / 2019

Transaction ID : SA11AI.5830

Amount of Each Receipt this Period
2574.66

Memo Item

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

Mailing Address 2000 NE 59th Ct

City Fort Lauderdale State FL Zip Code 33308-2112

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

Name of Employer (for Individual) ASTA Occupation (for Individual) Vice President

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1800.00

Date of Receipt
MM / DD / YYYY
06 / 02 / 2019

Transaction ID : SA11AI.5822

Amount of Each Receipt this Period
1800.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	8874.66
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 42
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<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. Ellenby, Jay, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1419 MacPhail Rd
 City Bel Air State MD Zip Code 21015-5610
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Safe Harbors Business Travel, LLC Occupation (for Individual) Business Owner
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 25 / 2019
Transaction ID : SA11AI.5798
 Amount of Each Receipt this Period
 514.93
 Memo Item

B. Enriquez, Helen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 256 West 38th Street, 11th Floor
 City New York State NY Zip Code 10018
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Ensemble Travel Group Occupation (for Individual) VP Product Development & Technology
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2019
Transaction ID : SA11AI.5800
 Amount of Each Receipt this Period
 514.93
 Memo Item

C. Ferreira, Sandi, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 566 W Adams St Ste 505
 City Chicago State IL Zip Code 60661
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) R. Crusoe & Son, LLC Occupation (for Individual) Senior Vice President
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 06 / 2019
Transaction ID : SA11AI.5765
 Amount of Each Receipt this Period
 257.46
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1287.32
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 42
	<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. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 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 / 2019
Transaction ID : SA11AI.5784
 Amount of Each Receipt this Period
 417.00
 Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 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 / 2019
Transaction ID : SA11AI.5785
 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 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 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 / 2019
Transaction ID : SA11AI.5786
 Amount of Each Receipt this Period
 417.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1251.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 42
	<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 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1668.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 09 / 2019
Transaction ID : SA11AI.5787
 Amount of Each Receipt this Period
 417.00
 Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2085.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 09 / 2019
Transaction ID : SA11AI.5788
 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 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2502.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 09 / 2019
Transaction ID : SA11AI.5789
 Amount of Each Receipt this Period
 417.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1251.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 OF 42
	<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. Geiser, Elizabeth, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 18663 MacArthur Blvd

City Irvine	State CA	Zip Code 92612-1200
----------------	-------------	------------------------

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

Name of Employer (for Individual) Uniglobe Travel Center	Occupation (for Individual) VP
---	-----------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
514.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03		22		2019

Transaction ID : SA11AI.5797

Amount of Each Receipt this Period
514.93

Memo Item

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

Mailing Address 1245 Young St 203

City Honolulu	State HI	Zip Code 96814
------------------	-------------	-------------------

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

Name of Employer (for Individual) HNL Travel Associates	Occupation (for Individual) President/Owner
--	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06		14		2019

Transaction ID : SA11AI.5779

Amount of Each Receipt this Period
257.46

Memo Item

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

Mailing Address 216 Summit Blvd
Ste 220

City Birmingham	State AL	Zip Code 35243
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel, Inc.	Occupation (for Individual) President & CEO
--	--

Receipt For: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1029.86

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2019

Transaction ID : SA11AI.5816

Amount of Each Receipt this Period
1029.86

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	1802.25
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 15 OF 42
<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. Haire, William, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 107 Lexington Court
 City Nashville State TN Zip Code 37218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travelink/American Express Occupation (for Individual) Managing Partner
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2574.66

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 20 / 2019
Transaction ID : SA11AI.5831
 Amount of Each Receipt this Period
 2574.66
 Memo Item

B. Hale, Roger, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7514 Stratford Place
 City Vestavia Hls State AL Zip Code 35242
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADTRAV Travel Management Occupation (for Individual) President/CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 08 / 2019
Transaction ID : SA11AI.5836
 Amount of Each Receipt this Period
 5000.00
 Memo Item

C. Haskins, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 N. Washington Street
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Co. Occupation (for Individual) VP
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2019
Transaction ID : SA11AI.5835
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	12574.66
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 OF 42
	<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. Haskins, Margaret, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 N. Washington St.
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Service Occupation (for Individual) President
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2019
Transaction ID : SA11AI.5828
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Haymaker, Richard, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1315 W 22nd St
 City Oak Brook State IL Zip Code 60532-2057
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Services Occupation (for Individual) Director
 Receipt For: 2020
 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 / 05 / 2019
Transaction ID : SA11AI.5782
 Amount of Each Receipt this Period
 300.00
 Memo Item

C. Hershberger, David, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9895 Momntgomery Rd
 City Cincinnati State OH Zip Code 45242-6424
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Prestige Travel Inc. Occupation (for Individual) President
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1030.89

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2019
Transaction ID : SA11AI.5820
 Amount of Each Receipt this Period
 1030.89
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3330.89
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 17 OF 42
<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. Hess, Alan, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 150 N Main St
Suite 200

City Bountiful State UT Zip Code 84010

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

Name of Employer (for Individual) Hess Corporate Travel Occupation (for Individual) President/CEO

Receipt For: 2020
 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
 02 / 13 / 2019

Transaction ID : SA11AI.5792

Amount of Each Receipt this Period
500.00

Memo Item

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

Mailing Address 5110 E Wallace Ave

City Scottsdale State AZ Zip Code 85254-1068

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

Name of Employer (for Individual) Mark Travel Occupation (for Individual) CEO

Receipt For: 2020
 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
 05 / 01 / 2019

Transaction ID : SA11AI.5763

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 31891 Paseo Monte Vis

City San Juan Capistrano State CA Zip Code 92675

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

Name of Employer (for Individual) Travel Edge Occupation (for Individual) Travel Advisor

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 24 / 2019

Transaction ID : SA11AI.5773

Amount of Each Receipt this Period
257.46

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1007.46
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 18 OF 42
<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. Juedes, David, H., Mr.,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2150 S Washburn Street
 City Oshkosh State WI Zip Code 54904
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Fox World Travel, Inc. Occupation (for Individual) Executive Chairman
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1029.86

Date of Receipt **05 / 28 / 2019**
Transaction ID : SA11AI.5818
 Amount of Each Receipt this Period 1029.86
 Memo Item

B. Kelly, Kimberly, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 N. Washington
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Service Occupation (for Individual) Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt **03 / 22 / 2019**
Transaction ID : SA11AI.5823
 Amount of Each Receipt this Period 1900.00
 Memo Item

C. Kerby, Zane, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St Ste. 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Am. Soc. of Travel Advisors Occupation (for Individual) CEO
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 1029.86

Date of Receipt **03 / 24 / 2019**
Transaction ID : SA11AI.5814
 Amount of Each Receipt this Period 1029.86
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	3959.72
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 19 OF 42
	<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. Koepf, Scott, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3111 N. University Drive
 Suite 300
 City Coral Springs State FL Zip Code 33065
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Cruise Planners Occupation (for Individual) VP, Strategic Development
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2019
Transaction ID : SA11AI.5771
 Amount of Each Receipt this Period
 257.46
 Memo Item

B. Krueger, Mary, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 3450 Lexington Ave N
 Suite 101
 City Shareview State MN Zip Code 55126
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mary Krueger Travel, LLC Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 205.97

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 21 / 2019
Transaction ID : SA11AI.5754
 Amount of Each Receipt this Period
 205.97
 Memo Item

C. Laborde Sanchez, Giselle, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5209 N Clark
 City Chicago State IL Zip Code 60640
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Mena Tours & Travel Inc. Occupation (for Individual) Travel Planner
 Receipt For: 2020
 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
 03 / 05 / 2019
Transaction ID : SA11AI.5794
 Amount of Each Receipt this Period
 500.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	963.43
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 OF 42
	<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. Lanotte-Day, Toni, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9 Circle Ln
 City Levittown State NY Zip Code 11756-2703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Toni Tours, Inc. Occupation (for Individual) CFO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 14 / 2019
Transaction ID : SA11AI.5829
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Lee, Walter, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 9880 Kaiser Ave NE
 City Monticello State MN Zip Code 55362-8685
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Quest/Travel Leaders Albertvill Occupation (for Individual) CFO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 13 / 2019
Transaction ID : SA11AI.5777
 Amount of Each Receipt this Period
 257.46
 Memo Item

C. Lentz Fryer, Cathie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 13291 South St
 City Cerritos State CA Zip Code 90703
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) CTA Travel Occupation (for Individual) President
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 02 / 2019
Transaction ID : SA11AI.5838
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7257.46
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 42
	<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. Lukasik, Laura, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 610 N. Washington St.
 City Naperville State IL Zip Code 60563
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Service Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 05 / 2019
Transaction ID : SA11AI.5825
 Amount of Each Receipt this Period
 2000.00
 Memo Item

B. Mardis, Shari, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 777 Main Street
 City Fort Worth State TX Zip Code 76102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Virtuoso Occupation (for Individual) Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2019
Transaction ID : SA11AI.5769
 Amount of Each Receipt this Period
 257.46
 Memo Item

C. Matthews, Lauren, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4315 Sussex Dr
 City Columbia State MO Zip Code 65203-6406
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Viking Travel Occupation (for Individual) Travel Agent
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 2000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 22 / 2019
Transaction ID : SA11AI.5827
 Amount of Each Receipt this Period
 2000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	4257.46
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 42
	<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. McIntyre, Heather, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 212 Sawmill Rd
 City Raleigh State NC Zip Code 27615
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Travel Experts, Inc. Occupation (for Individual) Mgr. Tech & Finance
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 257.46

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 01 / 2019
Transaction ID : SA11AI.5767
 Amount of Each Receipt this Period
 257.46
 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: 2020
 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 / 2019
Transaction ID : SA11AI.5618
 Amount of Each Receipt this Period
 85.00
 Memo Item

C. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 23 / 2019
Transaction ID : SA11AI.5619
 Amount of Each Receipt this Period
 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	427.46
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 23 OF 42
	<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. 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 425.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 05 / 23 / 2019
Transaction ID : SA11AI.5620
 Amount of Each Receipt this Period 85.00
 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: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 510.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 23 / 2019
Transaction ID : SA11AI.5621
 Amount of Each Receipt this Period 85.00
 Memo Item

C. O'Donnell, Beth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 2495 Main St Ste 340
 City Buffalo State NY Zip Code 14214
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) The Travel Team, Inc/Amex Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 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
 03 / 19 / 2019
Transaction ID : SA11AI.5759
 Amount of Each Receipt this Period 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	420.00
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 24 OF 42
<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. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Am. Soc. of Travel Advisors Occupation (for Individual) EVP, Advocacy
 Receipt For: 2020
 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
 05 / 19 / 2019
Transaction ID : SA11AI.5711
 Amount of Each Receipt this Period
 100.00
 Memo Item

B. Peck, Eben, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 675 N Washington St
 Ste 490
 City Alexandria State VA Zip Code 22314-1940
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Am. Soc. of Travel Advisors Occupation (for Individual) EVP, Advocacy
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 19 / 2019
Transaction ID : SA11AI.5718
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. Prochilo Maley, Helen, , Ms,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 663 W Market St
 City Long Beach State NY Zip Code 11561
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Promal Vacations Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 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
 03 / 21 / 2019
Transaction ID : SA11AI.5761
 Amount of Each Receipt this Period
 250.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	450.00
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 25 OF 42
	<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. Prochilo Maley, Helen, , Ms,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 663 W Market St

City Long Beach	State NY	Zip Code 11561
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Promal Vacations	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	20	/	2019

Transaction ID : SA11AI.5812

Amount of Each Receipt this Period
1000.00

Memo Item

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

Mailing Address 334 Ponderosa Ln

City Lima	State OH	Zip Code 45805
--------------	-------------	-------------------

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

Name of Employer (for Individual) Seddelmeyer Travel Concepts	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	27	/	2019

Transaction ID : SA11AI.5780

Amount of Each Receipt this Period
257.46

Memo Item

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

Mailing Address 5029 River Bluff Drive

City Fort Worth	State TX	Zip Code 76132
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Virtuoso	Occupation (for Individual) Director, Global Member Partnerships
---	---

Receipt For: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	13	/	2019

Transaction ID : SA11AI.5806

Amount of Each Receipt this Period
1000.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	2257.46
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 26 OF 42
	<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	<input type="checkbox"/> 17

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

A. Strand, Genevieve, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 12480 Kent Road

City King George	State VA	Zip Code 22485
---------------------	-------------	-------------------

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

Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) Director, Advocacy
--	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
337.96

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	17	/	2019

Transaction ID : SA11AI.5755

Amount of Each Receipt this Period
235.00

Memo Item

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

Mailing Address 5970 Guilford Rd

City Rockford	State IL	Zip Code 61107-2518
------------------	-------------	------------------------

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

Name of Employer (for Individual) Anglo California Travel Service	Occupation (for Individual) Vice President
--	---

Receipt For: 2020
 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
03	/	22	/	2019

Transaction ID : SA11AI.5762

Amount of Each Receipt this Period
250.00

Memo Item

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

Mailing Address 711 E. Cottonwood Lane
Ste A

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

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

Name of Employer (for Individual) ADA Travel	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
257.46

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2019

Transaction ID : SA11AI.5774

Amount of Each Receipt this Period
257.46

Memo Item

SUBTOTAL of Receipts This Page (optional).....	742.46
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 27 OF 42
	<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. Werner, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 W 635 Butterfield Rd
 Ste 220
 City Oakbrook Terrace State IL Zip Code 60181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAST Travel Network Occupation (for Individual) President & CEO
 Receipt For: 2020
 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 / 28 / 2019
Transaction ID : SA11AI.5757
 Amount of Each Receipt this Period
 250.00
 Memo Item

B. Werner, John, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 17 W 635 Butterfield Rd
 Ste 220
 City Oakbrook Terrace State IL Zip Code 60181
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) MAST Travel Network Occupation (for Individual) President & CEO
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 875.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 06 / 03 / 2019
Transaction ID : SA11AI.5802
 Amount of Each Receipt this Period
 625.00
 Memo Item

C. Wilson-Buttigieg, Jennifer, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 39 White Plains Rd
 City Bronxville State IL Zip Code 10708-5129
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Valerie Wilson Travel Occupation (for Individual) Co-President, Co-Owner
 Receipt For: 2020
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 08 / 2019
Transaction ID : SA11AI.5833
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	5875.00
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 28 OF 42
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<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
Zimmerman, Richard, , Mr.,

Mailing Address 1152 Pearl Road

City Brunswick	State OH	Zip Code 44212
-------------------	-------------	-------------------

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

Name of Employer (for Individual) KHM Travel Group	Occupation (for Individual) President & CEO
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	03	/	2019

Transaction ID : SA11AI.5840

Amount of Each Receipt this Period
5000.00

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

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	5000.00
TOTAL This Period (last page this line number only).....	79819.55

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 29 OF 42
<input 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 checked="" type="checkbox"/> 17

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

A. PNC Bank NA

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

Mailing Address 8800 Tincum Blvd.

City Philidelphia	State PA	Zip Code 19153
----------------------	-------------	-------------------

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 ▼
241.48

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02	/	22	/	2019

Transaction ID : SA17.5907

Amount of Each Receipt this Period
124.65

Memo Item
Interest Income

B. PNC Bank NA

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

Mailing Address 8800 Tincum Blvd.

City Philidelphia	State PA	Zip Code 19153
----------------------	-------------	-------------------

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 ▼
398.18

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	29	/	2019

Transaction ID : SA17.5908

Amount of Each Receipt this Period
156.70

Memo Item
Interest Income

C. PNC Bank NA

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

Mailing Address 8800 Tincum Blvd.

City Philidelphia	State PA	Zip Code 19153
----------------------	-------------	-------------------

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 ▼
522.93

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	26	/	2019

Transaction ID : SA17.5909

Amount of Each Receipt this Period
124.75

Memo Item
Interest Income

SUBTOTAL of Receipts This Page (optional).....	406.10
TOTAL This Period (last page this line number only).....	406.10

**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

Full Name (Last, First, Middle Initial)

A. CardConnect

Mailing Address 1000 Continental Dr
#300

City King of Prussia State PA Zip Code 19406

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.5850**
Amount of Each Disbursement this Period
685.94

Memo Item

Full Name (Last, First, Middle Initial)

B. CardConnect

Mailing Address 1000 Continental Dr
#300

City King of Prussia State PA Zip Code 19406

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 30 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.5853**
Amount of Each Disbursement this Period
337.17

Memo Item

Full Name (Last, First, Middle Initial)

C. CardConnect

Mailing Address 1000 Continental Dr
#300

City King of Prussia State PA Zip Code 19406

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
05 / 31 / 2019

FEC Identification Number

C
Transaction ID : **SB21B.5911**
Amount of Each Disbursement this Period
436.23

Memo Item

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

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

1459.34

**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

Full Name (Last, First, Middle Initial)

A. CardConnect

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		30		2019

Mailing Address 1000 Continental Dr
#300

City King of Prussia State PA Zip Code 19406

Purpose of Disbursement
Credit Card Processing Fees

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.5854**
Amount of Each Disbursement this Period

[REDACTED] 890.70

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B. Department of Treasury

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		10		2019

Mailing Address Internal Revenue Service

City Ogden State UT Zip Code 84201

Purpose of Disbursement
Federal Income Tax on Interest Income

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.5847**
Amount of Each Disbursement this Period

[REDACTED] 234.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

C. Mobile Cause

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		01		2019

Mailing Address 27001 Agoura Rd
Ste 350A

City Calabasas Hills State CA Zip Code 91301

Purpose of Disbursement
Software

FEC Identification Number

C [REDACTED]

Transaction ID : **SB21B.5845**
Amount of Each Disbursement this Period

[REDACTED] 4188.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

[REDACTED] 5312.70

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

[REDACTED]

**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

Full Name (Last, First, Middle Initial)

A. Mobile Cause

Mailing Address 27001 Agoura Rd
Ste 350A

City Calabasas Hills State CA Zip Code 91301

Purpose of Disbursement
Software

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 22 / 2019

FEC Identification Number

C
Transaction ID : SB21B.5846
Amount of Each Disbursement this Period
811.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C
Amount of Each Disbursement this Period

Memo Item

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

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

811.00
7583.04

**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. ANTHONY BROWN FOR CONGRESS

Mailing Address 12138 CENTRAL AVE #671

City
BOWIE

State
MD

Zip Code
20721

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MD District: 04

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number

C C00574640

Transaction ID : SB23.5897

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BRENDA LAWRENCE FOR CONGRESS

Mailing Address P.O. BOX 3060

City
SOUTHFIELD

State
MI

Zip Code
48037

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: MI District: 14

Date of Disbursement

MM / DD / YYYY
02 / 26 / 2019

FEC Identification Number

C C00552588

Transaction ID : SB23.5883

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. COLLINS FOR SENATOR

Mailing Address PO BOX 1096

City
BANGOR

State
ME

Zip Code
04402

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: ME District: 00

Date of Disbursement

MM / DD / YYYY
03 / 18 / 2019

FEC Identification Number

C C00314575

Transaction ID : SB23.5887

Amount of Each Disbursement this Period

1000.00

Memo Item

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

7000.00

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. ELISE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 500

City: GLENS FALLS State: NY Zip Code: 12801

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
State: NY District: 21

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number: C00547893
Transaction ID : SB23.5901
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. ELISE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 500

City: GLENS FALLS State: NY Zip Code: 12801

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
State: NY District: 21

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number: C00547893
Transaction ID : SB23.5902
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. ERNST VICTORY

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 93441

City: DES MOINES State: IA Zip Code: 50393

Purpose of Disbursement: Contribution to Fundraising Committee

Candidate Name

Office Sought: House Senate President
State: IA District: 00

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
03 / 04 / 2019

FEC Identification Number: C00571927
Transaction ID : SB23.5885
Amount of Each Disbursement this Period: 1000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 8500.00

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 BENNIE THOMPSON

Mailing Address PO BOX 100

City
BOLTON

State
MS

Zip Code
39041

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: MS District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	5		2	0	1	9

FEC Identification Number

C C00279851

Transaction ID : SB23.5882

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. FRIENDS OF BENNIE THOMPSON

Mailing Address PO BOX 100

City
BOLTON

State
MS

Zip Code
39041

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: MS District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	1	9

FEC Identification Number

C C00279851

Transaction ID : SB23.5884

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. FRIENDS OF MARK WARNER

Mailing Address 1751 POTOMAC GREENS DRIVE

City
ALEXANDRIA

State
VA

Zip Code
22314

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: VA District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	9

FEC Identification Number

C C00438713

Transaction ID : SB23.5898

Amount of Each Disbursement this Period

5000.00

Memo Item

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

7000.00

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. FRIENDS OF MARK WARNER

Full Name (Last, First, Middle Initial)
Mailing Address 1751 POTOMAC GREENS DRIVE

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: VA District: 00

Date of Disbursement: 06 / 07 / 2019

FEC Identification Number: C00438713
Transaction ID : SB23.5899
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. FRIENDS OF MAZIE HIRONO

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: HI District: 00

Date of Disbursement: 06 / 07 / 2019

FEC Identification Number: C00420760
Transaction ID : SB23.5863
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. GUTHRIE FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 9639

City BOWLING GREEN State KY Zip Code 42102

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: KY District: 02

Date of Disbursement: 03 / 18 / 2019

FEC Identification Number: C00445023
Transaction ID : SB23.5888
Amount of Each Disbursement this Period: 5000.00

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	15000.00
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. HEARTLAND VALUES PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 505

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement Contribution to Leadership PAC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2019 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 05 / 08 / 2019

FEC Identification Number: C00409003

Transaction ID : SB23.5891

Amount of Each Disbursement this Period: 1000.00

Memo Item

B. HUDSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 5053

City CONCORD State NC Zip Code 28027

Purpose of Disbursement Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President

Disbursement For: 2020 Primary General Other (specify) ▼

State: NC District: 08

Date of Disbursement: 01 / 19 / 2019

FEC Identification Number: C00504522

Transaction ID : SB23.5881

Amount of Each Disbursement this Period: 1500.00

Memo Item

C. JOBS OPPORTUNITY AND NEW IDEAS PAC

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 93441

City DES MOINES State IA Zip Code 50393

Purpose of Disbursement Contribution to Leadership PAC

Candidate Name

Office Sought: House Senate President

Disbursement For: 2019 Primary General Other (specify) ▼

State: District:

Date of Disbursement: 06 / 07 / 2019

FEC Identification Number: C00566851

Transaction ID : SB23.5896

Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 5000.00

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. JONI FOR IOWA

Mailing Address PO BOX 93441

City
DES MOINES

State
IA

Zip Code
50393

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 00

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number

C C00546788

Transaction ID : SB23.5892

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JONI FOR IOWA

Mailing Address PO BOX 93441

City
DES MOINES

State
IA

Zip Code
50393

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President
State: IA District: 00

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number

C C00546788

Transaction ID : SB23.5893

Amount of Each Disbursement this Period

4000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. NUTMEG PAC

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

City
STAMFORD

State
CT

Zip Code
06901

Purpose of Disbursement
Contribution to Leadership PAC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2019
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 13 / 2019

FEC Identification Number

C C00492983

Transaction ID : SB23.5886

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

14000.00

**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 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. PINEAPPLE PAC		Date of Disbursement MM / DD / YYYY 06 / 07 / 2019
Mailing Address PO BOX 15293		FEC Identification Number C C00539601 Transaction ID : SB23.5862 Amount of Each Disbursement this Period 5000.00
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement Leadership PAC Contribution		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2019 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: District:		

Full Name (Last, First, Middle Initial) B. PRAMILA FOR CONGRESS		Date of Disbursement MM / DD / YYYY 06 / 17 / 2019
Mailing Address PO BOX 21912		FEC Identification Number C C00605592 Transaction ID : SB23.5905 Amount of Each Disbursement this Period 5000.00
City SEATTLE	State WA	Zip Code 98111
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: WA District: 07		

Full Name (Last, First, Middle Initial) C. SCOTT PETERS FOR CONGRESS		Date of Disbursement MM / DD / YYYY 03 / 27 / 2019
Mailing Address PO BOX 22074		FEC Identification Number C C00503110 Transaction ID : SB23.5890 Amount of Each Disbursement this Period 2500.00
City SAN DIEGO	State CA	Zip Code 92192
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: CA District: 52		

SUBTOTAL of Disbursements This Page (optional).....▶	12500.00
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. SINEMA FOR ARIZONA

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 7586

City PHOENIX State AZ Zip Code 85011

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: AZ District: 09

Date of Disbursement: 06 / 07 / 2019

FEC Identification Number: C00508804
Transaction ID : SB23.5894
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. SINEMA FOR ARIZONA

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 7586

City PHOENIX State AZ Zip Code 85011

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2024 Primary General Other (specify) ▼

State: AZ District: 09

Date of Disbursement: 06 / 07 / 2019

FEC Identification Number: C00508804
Transaction ID : SB23.5895
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. SUSAN DAVIS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 84049

City SAN DIEGO State CA Zip Code 92138

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: CA District: 53

Date of Disbursement: 03 / 27 / 2019

FEC Identification Number: C00344671
Transaction ID : SB23.5889
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 12500.00

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. TED DEUTCH FOR CONGRESS COMMITTEE

Mailing Address 910 17TH ST NW STE 925

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
State: FL District: 22

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 12 / 2019

FEC Identification Number

C C00469163

Transaction ID : SB23.5859

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. TITUS FOR CONGRESS

Mailing Address PO BOX 72454

City LAS VEGAS State NV Zip Code 89170

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
State: NV District: 01

Disbursement For: 2020
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
01 / 17 / 2019

FEC Identification Number

C C00499467

Transaction ID : SB23.5856

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. TITUS FOR CONGRESS

Mailing Address PO BOX 72454

City LAS VEGAS State NV Zip Code 89170

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
State: NV District: 01

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 07 / 2019

FEC Identification Number

C C00499467

Transaction ID : SB23.5864

Amount of Each Disbursement this Period

5000.00

Memo Item

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

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

11000.00

**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 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. TREY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 421

City: JEFFERSONVILLE State: IN Zip Code: 47130

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: _____

Office Sought: House Senate President
State: IN District: 09

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number: **C** C00590463
Transaction ID : SB23.5861
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. VAL DEMINGS FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 536926

City: ORLANDO State: FL Zip Code: 32853

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: _____

Office Sought: House Senate President
State: FL District: 10

Disbursement For: 2020
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY
06 / 07 / 2019

FEC Identification Number: **C** C00590489
Transaction ID : SB23.5900
Amount of Each Disbursement this Period: 5000.00

Memo Item

C.

Full Name (Last, First, Middle Initial)
Mailing Address

City: _____ State: _____ Zip Code: _____

Purpose of Disbursement: _____

Candidate Name: _____

Office Sought: House Senate President
State: _____ District: _____

Disbursement For: _____
 Primary General Other (specify) ▼

Date of Disbursement: MM / DD / YYYY

FEC Identification Number: **C** _____
Amount of Each Disbursement this Period: _____

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	10000.00
TOTAL This Period (last page this line number only).....▶	102500.00