

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

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

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

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

5. Covering Period / / 2018 through / / 2018

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 / / 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="2018"/>	<input type="text"/>	<input type="text" value="274314.23"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="289061.38"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1543.05"/>	<input type="text" value="123683.26"/>
(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="290604.43"/>	<input type="text" value="397997.49"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="- 5818.84"/>	<input type="text" value="101574.22"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="296423.27"/>	<input type="text" value="296423.27"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Report Covering the Period: From: M M / D D / Y Y Y Y 11 / 27 / 2018 To: M M / D D / Y Y Y Y 12 / 31 / 2018

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).....	927.00	84995.82
(ii) Unitemized	350.48	22594.48
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	1277.48	107590.30
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	10000.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	1277.48	117590.30
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	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	265.57	1092.96
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)).....▶	1543.05	123683.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1543.05	123683.26

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	181.16	13422.94
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	181.16	13422.94
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	- 6000.00	84500.00
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	3651.28
(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	3651.28
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)) ..	- 5818.84	101574.22
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	- 5818.84	101574.22

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1277.48	117590.30
34. Total Contribution Refunds (from Line 28(d))	0.00	3651.28
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1277.48	113939.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	181.16	13422.94
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	181.16	13422.94

**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 11
	<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. Chamberlin, Ann, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 7755 33rd Ave NW
 City Seattle State WA Zip Code 98117-4714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ASTA Occupation (for Individual) SVP
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1210.00

Date of Receipt 12 / 10 / 2018
Transaction ID : SA11AI.5479
 Amount of Each Receipt this Period 10.00
 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: 2018 Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 4637.00

Date of Receipt 12 / 09 / 2018
Transaction ID : SA11AI.5446
 Amount of Each Receipt this Period 417.00
 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: 2018 Primary General Other (specify)
 Aggregate Year-to-Date ▼ 680.00

Date of Receipt 12 / 23 / 2018
Transaction ID : SA11AI.5478
 Amount of Each Receipt this Period 85.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	512.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 11
	<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) American Society of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 647.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 27 / 2018
Transaction ID : SA11AI.5435
 Amount of Each Receipt this Period 50.00
 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) American Society of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2019
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 697.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 28 / 2018
Transaction ID : SA11AI.5437
 Amount of Each Receipt this Period 50.00
 Memo Item

C. 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) American Society of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 747.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 29 / 2018
Transaction ID : SA11AI.5440
 Amount of Each Receipt this Period 50.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 11
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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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) American Society of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 962.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 11 / 2018
Transaction ID : SA11AI.5475
 Amount of Each Receipt this Period
 215.00
 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) American Society of Travel Agents Occupation (for Individual) SVP, Government & Public Affairs
 Receipt For: 2018
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1012.81

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 12 / 14 / 2018
Transaction ID : SA11AI.5442
 Amount of Each Receipt this Period
 50.00
 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).....▶	265.00
TOTAL This Period (last page this line number only).....▶	927.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 OF 11
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

A. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
PNC Bank NA

Mailing Address 8800 Tinicum Blvd.

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

FEC ID number of contributing federal political committee.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /
Transaction ID : SA17.5486

Amount of Each Receipt this Period

Memo Item
Interest Income

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.

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
 / /

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.

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt
 / /

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="265.57"/>
TOTAL This Period (last page this line number only).....	<input type="text" value="265.57"/>

**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. PNC Bank NA

Mailing Address 8800 Tinicum Blvd.

City Philadelphia

State PA

Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
12			31			2018					

FEC Identification Number

C

Transaction ID : SB21B.5485

Amount of Each Disbursement this Period

181.16

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

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

FEC Identification Number

C

Amount of Each Disbursement this Period

--

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

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Category/Type

Date of Disbursement

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

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).....▶

181.16

181.16

**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. LOBIONDO FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address P. O. BOX 550

City
VINELAND

State
NJ

Zip Code
08362

Purpose of Disbursement
Return of uncashed check

Candidate Name

Office Sought: House
 Senate
 President
State: NJ District: 02

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C C00269340

Transaction ID : SB23.5483

Amount of Each Disbursement this Period

- 1000.00

Memo Item

B. TITUS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 72454

City
LAS VEGAS

State
NV

Zip Code
89170

Purpose of Disbursement
Return of uncashed check

Candidate Name

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

Disbursement For: 2018
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
12			31			2018			

FEC Identification Number

C C00499467

Transaction ID : SB23.5480

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) ▼

Category/
Type

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

- 6000.00

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

- 6000.00