

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) **123 N. Pitt. St.**
Suite 400
 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 / / through / /

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

Signature of Treasurer **Peck, Eben, , ,** Date / /

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="2023"/>		375321.59
(b) Cash on Hand at Beginning of Reporting Period.....	435693.01	
(c) Total Receipts (from Line 19)	1612.10	180670.82
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	437305.11	555992.41
7. Total Disbursements (from Line 31).....	1000.00	119687.30
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	436305.11	436305.11
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information, contact the Federal Election Commission at 800-424-9530 or visit www.fec.gov

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).....	1278.92	129000.17
(ii) Unitemized	1970.86	38178.05
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	3249.78	167178.22
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	7500.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	3249.78	174678.22
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.).....	- 1637.68	5992.60
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)).....▶	1612.10	180670.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	1612.10	180670.82

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	0.00	1687.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	1687.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	118000.00
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)) ..	1000.00	119687.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1000.00	119687.30

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)	3249.78	174678.22
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3249.78	174678.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	1687.30
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	1687.30

**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. Carpenter, Thomas, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 408 E. 7th Street
 City Brooklyn State NY Zip Code 11218
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Huckleberry Travel Owner
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 2153.82

Date of Receipt
 08 / 14 / 2023
Transaction ID : SA11AI.17032
 Amount of Each Receipt this Period 51.28
 Memo Item
 Contribution

B. de Perez, Laurie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 712 E 145th St
 City Burnsville State MN Zip Code 55337
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 GetAway Travel LLC Owner/Agent
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.88

Date of Receipt
 08 / 24 / 2023
Transaction ID : SA11AI.17003
 Amount of Each Receipt this Period 25.64
 Memo Item
 Contribution

C. Green, Brian, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 Southlake Parkway
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 ADTRAV Travel Agent
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt
 08 / 01 / 2023
Transaction ID : SA11AI.16961
 Amount of Each Receipt this Period 104.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	180.92
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. Hoffman, Carole, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 Southlake Pkwy
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADTRAV Occupation (for Individual) Travel Advisor
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 08 / 01 / 2023
Transaction ID : SA11Al.16964
 Amount of Each Receipt this Period 104.00
 Memo Item
 Contribution

B. Klimak, Amanda, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1525 Hamilton Ave
 City Waterbury State CT Zip Code 06706
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Largay Travel Occupation (for Individual) President
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 1352.41

Date of Receipt 08 / 12 / 2023
Transaction ID : SA11Al.16954
 Amount of Each Receipt this Period 62.00
 Memo Item
 Contribution

C. Lang, Monica, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4555 Southlake Pkwy
 City Birmingham State AL Zip Code 35244
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) ADTRAV Occupation (for Individual) Travel Advisor
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date ▼ 208.00

Date of Receipt 08 / 01 / 2023
Transaction ID : SA11Al.17015
 Amount of Each Receipt this Period 104.00
 Memo Item
 Contribution

SUBTOTAL of Receipts This Page (optional).....▶	270.00
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"/> 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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AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name A. Lennon, Lee, , ,			Date of Receipt MM / DD / YYYY 08 / 29 / 2023 Transaction ID : SA11Al.17004
Mailing Address 3801 Ponce de Leon Blvd			Amount of Each Receipt this Period 16.00
City Coral Gables	State FL	Zip Code 33134	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) Travel by Design, Inc.		Occupation (for Individual) Owner/Principal	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 228.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name B. Nall, Timothy, , ,			Date of Receipt MM / DD / YYYY 08 / 01 / 2023 Transaction ID : SA11Al.17035
Mailing Address 4555 Southlake Pkwy			Amount of Each Receipt this Period 104.00
City Birmingham	State AL	Zip Code 35244	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) ADTRAV		Occupation (for Individual) Travel Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name C. Porter, Angela, , ,			Date of Receipt MM / DD / YYYY 08 / 01 / 2023 Transaction ID : SA11Al.16958
Mailing Address 4555 Southlake Pkwy			Amount of Each Receipt this Period 104.00
City Birmingham	State AL	Zip Code 35244	<input type="checkbox"/> Memo Item Contribution
FEC ID number of contributing federal political committee. C			
Name of Employer (for Individual) ADTRAV		Occupation (for Individual) Travel Advisor	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional).....▶	224.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 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. Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
Spencer, Debra, , ,

Mailing Address 2725 W Washington Blvd

City Chicago	State IL	Zip Code 60612
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Accent on Vacation Travel	Occupation (for Individual) Travel Advisor
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Receipt For:
 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
 08 / 01 / 2023
Transaction ID : SA11AI.16976

Amount of Each Receipt this Period
500.00

Memo Item
Contribution

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

Mailing Address 4555 Southlake Parkway

City Birmingham	State AL	Zip Code 35244
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) ADTRAV	Occupation (for Individual) Travel Agent
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 08 / 01 / 2023
Transaction ID : SA11AI.16985

Amount of Each Receipt this Period
104.00

Memo Item
Contribution

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

Mailing Address

City	State	Zip Code
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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
Contribution

SUBTOTAL of Receipts This Page (optional).....	604.00
TOTAL This Period (last page this line number only).....	1278.92

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 11
<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 Tinicum Blvd.

City Philidelphia	State PA	Zip Code 19153
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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 ▼
5992.60

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2023

Transaction ID : SA17.17042

Amount of Each Receipt this Period
- 1637.68

Memo Item
Interest, dividends and capital gains (loss)

B.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

C.

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

Mailing Address

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

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y

Amount of Each Receipt this Period

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	- 1637.68
TOTAL This Period (last page this line number only).....▶	- 1637.68

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. NUTMEG PAC

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

City
STAMFORD

State
CT

Zip Code
06901

Purpose of Disbursement
Contribution to Political Action Committee

011
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2024
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	28	/	2023

FEC Identification Number

C C00492983

Transaction ID : SB23.17043

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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FEC Identification Number

C

Amount of Each Disbursement this Period

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Memo Item

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

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

1000.00

1000.00
