

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

RECEIVED  
FEDERAL ELECTION  
COMMISSION MAIL ROOM

JUL 10 11 46 AM '98

|   |  |  |
|---|--|--|
| 1. NAME OF COMMITTEE (in full)<br><b>American Society of Travel Agents PAC</b>  |  | 2. FEC IDENTIFICATION NUMBER<br><br><b>C00114108</b> |
| ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported<br><b>1101 King Street</b> |  |  |
| CITY, STATE and ZIP CODE<br><b>Alexandria, VA 22314</b>   |  |  |

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

## 4. TYPE OF REPORT

- (a)  April 15 Quarterly Report  
 July 15 Quarterly Report  
 October 15 Quarterly Report  
 January 31 Year End Report  
 July 31 Mid Year Report (Non-election Year Only)

- Monthly Report Due On:
- |                                      |                                       |                                      |
|--------------------------------------|---------------------------------------|--------------------------------------|
| <input type="checkbox"/> February 20 | <input type="checkbox"/> June 20      | <input type="checkbox"/> October 20  |
| <input type="checkbox"/> March 20    | <input type="checkbox"/> July 20      | <input type="checkbox"/> November 20 |
| <input type="checkbox"/> April 20    | <input type="checkbox"/> August 20    | <input type="checkbox"/> December 20 |
| <input type="checkbox"/> May 20      | <input type="checkbox"/> September 20 | <input type="checkbox"/> January 31  |

Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_


Thirtieth day report following the General Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (b) Is this Report an Amendment?  YES  NO

| SUMMARY   | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date   |
|---|-------------------------|---|
| 5. Covering Period <u>04/01/98</u> through <u>06/30/98</u>                                    |                         |   |
| 6. (a) Cash on Hand January 1, 19 <u>98</u>   |                         | \$ 34,216.38  |
| (b) Cash on Hand at Beginning of Reporting Period   | \$ 37,323.85            |   |
| (c) Total Receipts (from line 19)   | \$ 9,425.98             | \$ 28,197.29  |
| (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)      | \$ 46,749.83            | \$ 62,413.67  |
| 7. Total Disbursements (from Line 30)   | \$ 3,405.21             | \$ 19,069.05  |
| 8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))                 | \$ 43,344.62            | \$ 43,344.62  |
| 9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)  | \$ 0.00                 | For further information:<br>Federal Election Commission<br>999 E Street, NW<br>Washington, DC 20463<br>Toll Free 800-424-9530<br>Local 202-219-3420 |
| 10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D) | \$ 0.00                 |   |

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name Of Treasurer  
**Charles Sturm**

Signature of Treasurer  Date **7.7.98**

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

|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|
|  |  |  |  |  |  |  |  |  |
|--|--|--|--|--|--|--|--|--|

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised 11/1/81

| NAME OF COMMITTEE   | REPORT COVERING PERIOD |               |
|---|------------------------|---------------|
| American Society of Travel Agents PAC   | FROM: 04/01/98         | TO: 06/30/98  |
|   | COLUMN A               | COLUMN B      |
|   | Total This Period      | Calendar Year |
| <b>I. Receipts</b>  |                        |               |
| 11. Contributions (other than loans) From:  |                        |               |
| a. Individual/Persons Other Than Political Committees   |                        |               |
| i. Itemized (Use Schedule A).....   | 0.00                   | 550.00        |
| ii. Unitemized.....   | 9,240.00               | 27,285.00     |
| iii. Total..... (add i and ii) >  | 9,240.00               | 27,835.00     |
| b. Political Party Committees.....  | 0.00                   | 0.00          |
| c. Other Political Committees (such as PACs).....   | 0.00                   | 0.00          |
| d. Total Contributions..... (add aiii, b and c) >   | 9,240.00               | 27,835.00     |
| 12. Transfers From Affiliated/Other Party Committees.....                                       | 0.00                   | 0.00          |
| 13. All Loans Received.....   | 0.00                   | 0.00          |
| 14. Loan Repayments Received.....   | 0.00                   | 0.00          |
| 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....                             | 0.00                   | 0.00          |
| 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....     | 0.00                   | 0.00          |
| 17. Other Federal Receipts (Dividends, Interest, etc.).....                                     | 185.98                 | 362.29        |
| 18. Transfers from Nonfederal Account for Joint Activity.....                                   | 0.00                   | 0.00          |
| 19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >                             | 9,425.98               | 28,197.29     |
| 20. Total Federal Receipts..... (subtract line 16 from line 19) >                               | 9,425.98               | 28,197.29     |
| <b>II. Disbursements</b>  |                        |               |
| 21. Operating Expenditures:   |                        |               |
| a. Shared Federal/Non-Federal Activity (from Schedule H4)                                       |                        |               |
| i. Federal Share.....   | 0.00                   | 0.00          |
| ii. Non-Federal Share.....  | 55.21                  | 55.21         |
| b. Other Federal Operating Expenditures.....  | 0.00                   | 213.84        |
| c. Total Operating Expenditures..... (Add aii, aii, and b) >                                    | 55.21                  | 269.05        |
| 22. Transfers to Affiliated/Other Party Committees.....   | 0.00                   | 0.00          |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....          | 2,100.00               | 16,650.00     |
| 24. Independent Expenditures (use Schedule E).....  | 0.00                   | 0.00          |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)(1) 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. Individual/Persons Other Than Political Committees.....                                      | 0.00                   | 0.00          |
| b. Political Party Committees.....  | 0.00                   | 0.00          |
| c. Other Political Committees (Such As PACs).....   | 0.00                   | 0.00          |
| d. Total Contribution Refunds..... (Add a, b, and c) >  | 0.00                   | 0.00          |
| 29. Other Disbursements.....  | 1,250.00               | 2,150.00      |
| 30. Total Disbursements..... (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >                   | 3,405.21               | 19,069.05     |
| 31. Total Federal Disbursements..... (Subtract line 21 aii from line 30) >                      | 3,350.00               | 19,013.84     |
| <b>III. Net Contributions/Operating Expenditures</b>  |                        |               |
| 32. Total Contributions (Other than loans) (from line 11d).....                                 | 9,240.00               | 27,835.00     |
| 33. Total Contribution Refunds (from line 28d).....   | 0.00                   | 0.00          |
| 34. Net Contributions (Other than loans) (subtract line 33 from 32).....                        | 9,240.00               | 27,835.00     |
| 35. Total Federal Operating Expenditures..... (add 21 aii and 21 b) >                           | 0.00                   | 213.84        |
| 36. Offsets to Operating Expenditures (from line 15).....                                       | 0.00                   | 0.00          |
| 37. Net Operating Expenditures..... (subtract line 36 from 35) >                                | 0.00                   | 213.84        |

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 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 Agents PAC

| A. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
|--|------------------|-----------------------------|------------------------------------|
| Merrill Lynch Ready Assets<br>P. O. Box 11063<br>Church Station, NY 10249  |                  | 05/26/98                    | 57.21                              |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ | 233.52                             |
| B. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
| Merrill Lynch Ready Assets<br>P. O. Box 11063<br>Church Station, NY 10249  |                  | 06/03/98                    | 71.41                              |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ | 304.93                             |
| C. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
| Merrill Lynch Ready Assets<br>P. O. Box 11063<br>Church Station, NY 10249  |                  | 06/30/98                    | 57.36                              |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ | 362.29                             |
| D. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
|  |                  |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ |                                    |
| E. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
|  |                  |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ |                                    |
| F. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
|  |                  |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ |                                    |
| G. Full Name, Mailing Address and Zip Code   | Name of Employer | Date (Month day, Year)      | Amount of Each Receipt this Period |
|  |                  |                             |                                    |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Occupation       | Aggregate Year-to-date > \$ |                                    |

|   |        |
|---|--------|
| SUB TOTAL of Receipts This Page (Optional).....>          | 185.98 |
| TOTAL this Period (Last page this line number only).....> | 185.98 |

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

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

NAME OF COMMITTEE (In Full)  
 American Society of Travel Agents PAC

| A. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement  | Date (Month day, Year) | Amount of Each Disb. this Period |
|--|--|------------------------|----------------------------------|
| Riggs National Bank<br>PO Box 96758<br>Washington, DC 20090-6758 | Operating Expense<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)       | 06/30/98               | 55.21                            |
| B. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| C. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| D. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| E. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| F. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| G. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| H. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |
| I. Full Name, Mailing Address and Zip Code                       | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) | Date (Month day, Year) | Amount of Each Disb. this Period |

|   |       |
|---|-------|
| SUB TOTAL of Disbursements this page (Optional).....>     | 55.21 |
| TOTAL this Period (Last page this line number only).....> | 55.21 |

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1  
FOR LINE NUMBER 23

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

| A. Full Name, Mailing Address and Zip Code   | Purpose of Disbursement   | Date (Month day, Year) | Amount of Each Disb. this Period |
|--|---|------------------------|----------------------------------|
| Tom Davis for Congress<br>P.O. Box 471<br>Annandale, VA 22003  | Thomas M. Davis, U.S. HOUSE 11th VA<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998  | 05/08/98               | 100.00                           |
| B. Full Name, Mailing Address and Zip Code<br>Ike Skelton for Congress Committee<br>P.O. Box A<br>Harrisonville, MO 64701                | Ike Skelton for Congress<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998             | 06/24/98               | 500.00                           |
| C. Full Name, Mailing Address and Zip Code<br>John McCain for Senate<br>507 Capital Court NE<br>Suite 100<br>Washington, DC 20002        | John McCain, U.S. SENATE AZ<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998          | 06/24/98               | 500.00                           |
| D. Full Name, Mailing Address and Zip Code<br>Jon Fox for Congress<br>4451 Brookfield Corp. Dr.<br>Suite 200<br>Chantilly, VA 22021-1653 | Jon D. Fox, U.S. HOUSE 13th PA<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998       | 06/24/98               | 250.00                           |
| E. Full Name, Mailing Address and Zip Code<br>Friends of Mike Forbes for Congress<br>P.O. Box 505<br>Farmingville, NY 11738              | Michael P. Forbes, U.S. HOUSE 1st NY<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998 | 06/24/98               | 500.00                           |
| F. Full Name, Mailing Address and Zip Code<br>Jean Lelsing<br>PO Box 53<br>Ratesville, IN 47006  | Jean Lelsing, 9th IN<br>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998                 | 06/24/98               | 250.00                           |
| G. Full Name, Mailing Address and Zip Code   | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                              | Date (Month day, Year) | Amount of Each Disb. this Period |
| H. Full Name, Mailing Address and Zip Code   | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                              | Date (Month day, Year) | Amount of Each Disb. this Period |
| I. Full Name, Mailing Address and Zip Code   | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                              | Date (Month day, Year) | Amount of Each Disb. this Period |

|   |          |
|---|----------|
| SUB TOTAL of Disbursements this page (Optional).....>     | 2,100.00 |
| TOTAL this Period (Last page this line number only).....> | 2,100.00 |

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

| A. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement   | Date (Month day, Year) | Amount of Each Disb. this Period |
|---|---|------------------------|----------------------------------|
| Nebraskans for Jon Christensen<br>328 South 72nd St<br>Omaha, NE 68114  | Jon Christensen, GOVERNOR NE<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify) 1998 | 05/08/98               | 1,000.00                         |
| B. Full Name, Mailing Address and Zip Code<br>Jerry Melvin Campaign Fund<br>P.O. Box 902<br>Fort Walton, FL 32549 | Jerry Melvin, FL<br>Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                  | 06/24/98               | 250.00                           |
| C. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| D. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| E. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| F. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| G. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| H. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |
| I. Full Name, Mailing Address and Zip Code  | Purpose of Disbursement<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (Specify)                      | Date (Month day, Year) | Amount of Each Disb. this Period |

|   |          |
|---|----------|
| SUB TOTAL of Disbursements this page (Optional).....>     | 1,250.00 |
| TOTAL this Period (Last page this line number only).....> | 1,250.00 |

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

The Commission has added this page to the end of this filing to indicate how it was received.

Hand Delivered Date of Receipt

First Class Mail POSTMARKED

Registered/Certified Mail POSTMARKED  
7-9-98

No Postmark

Postmark Illegible

Received from the House office of Records and Registration Date of Receipt

Received from the Senate Office of Public Records Date of Receipt

Other ( Specify): Postmarked  
\_\_\_\_\_  
and/or Date of Receipt

Electronic Filing

  
PREPARER

7-10-98  
DATE PREPARED