



**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="2021"/>	<input type="text" value="347999.97"/>	<input type="text" value="347999.97"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="321892.95"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="90664.77"/>	<input type="text" value="156997.43"/>
(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="412557.72"/>	<input type="text" value="504997.40"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="34067.38"/>	<input type="text" value="126507.06"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="378490.34"/>	<input type="text" value="378490.34"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> 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).....	62549.88	105673.35
(ii) Unitemized .....	20193.56	43371.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	82743.44	149044.48
(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) .....	82743.44	149044.48
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.....	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	2921.33	2952.95
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)).....▶	90664.77	156997.43
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	90664.77	156997.43

**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 .....	3067.38	9507.06
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3067.38	9507.06
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	31000.00	117000.00
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)) ..	34067.38	126507.06
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	34067.38	126507.06

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	82743.44	149044.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	82743.44	149044.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3067.38	9507.06
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3067.38	9507.06

**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 89
<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ardis, Rick, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 30 / 2021 <b>Transaction ID : SA11AI.11140</b>
Mailing Address 229 Paterson Avenue Suite 1		Amount of Each Receipt this Period 500.00
City East Rutherford	State NJ	Zip Code 07073
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ardis Travel	Occupation (for Individual) General Manger	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1012.82	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Ardis, Rick, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 19 / 2021 <b>Transaction ID : SA11AI.11622</b>
Mailing Address 229 Paterson Avenue Suite 1		Amount of Each Receipt this Period 25.00
City East Rutherford	State NJ	Zip Code 07073
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Ardis Travel	Occupation (for Individual) General Manger	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1037.82	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Bergin, Kelly, , ,</b>		Date of Receipt MM / DD / YYYY 07 / 01 / 2021 <b>Transaction ID : SA11AI.11098</b>
Mailing Address 4800 N Federal Hwy Ste 200D		Amount of Each Receipt this Period 102.56
City Boca Raton	State FL	Zip Code 33431
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) OASIS Travel Network	Occupation (for Individual) President	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 205.12	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	627.56
<b>TOTAL</b> 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 89
	<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. Bergin, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4800 N Federal Hwy Ste 200D  
 City Boca Raton State FL Zip Code 33431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OASIS Travel Network Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2021  
**Transaction ID : SA11AI.11450**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

**B. Bergin, Kelly, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4800 N Federal Hwy Ste 200D  
 City Boca Raton State FL Zip Code 33431  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) OASIS Travel Network Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 31 / 2021  
**Transaction ID : SA11AI.11844**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

**C. Burk, Wendy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7701 Herschel Ave  
 City La Jolla State CA Zip Code 92037-4406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cadence Travel Occupation (for Individual) Owner/CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 30 / 2021  
**Transaction ID : SA11AI.11447**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	717.94
<b>TOTAL</b> 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 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 4601.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 03 / 2021  
**Transaction ID : SA11AI.11147**  
 Amount of Each Receipt this Period  
 2500.00  
 Memo Item

**B. Cameron, Mike, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 5588 South Green Street  
 City Salt Lake City State UT Zip Code 84123  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Christopherson Andavo Travel Occupation (for Individual) CEO  
 Receipt For: 2022  
 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  
 12 / 10 / 2021  
**Transaction ID : SA11AI.11819**  
 Amount of Each Receipt this Period  
 5000.00  
 Memo Item

**C. 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) Huckleberry Travel Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 14 / 2021  
**Transaction ID : SA11AI.11189**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	7551.28
<b>TOTAL</b> 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 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 256.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 14 / 2021  
**Transaction ID : SA11AI.11407**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

**B. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 14 / 2021  
**Transaction ID : SA11AI.11493**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

**C. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 358.96

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 14 / 2021  
**Transaction ID : SA11AI.11757**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	153.84
<b>TOTAL</b> 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 89
<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. 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) Huckleberry Travel Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 410.24

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 14 / 2021  
**Transaction ID : SA11AI.11822**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

**B. Carr, Erica, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 957 Cherokee Rd  
 City Gainesville State GA Zip Code 30501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) bookitbox TRAVEL Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 26 / 2021  
**Transaction ID : SA11AI.11253**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**C. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3589.74

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2021  
**Transaction ID : SA11AI.11224**  
 Amount of Each Receipt this Period 3589.74  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	3897.43
<b>TOTAL</b> 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 89
	<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. 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:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 249.00

Date of Receipt 08 / 03 / 2021  
**Transaction ID : SA11AI.11980**  
 Amount of Each Receipt this Period 50.00  
 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: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 505.41

Date of Receipt 10 / 19 / 2021  
**Transaction ID : SA11AI.11512**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**C. Chiarini, Jade, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 13291 South Street  
 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) Travel Advisor  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 07 / 01 / 2021  
**Transaction ID : SA11AI.11101**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	562.82
<b>TOTAL</b> 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 89
	<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. Coubarous-Payne, Denise, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3625 Welsh Rd  
 City Willow Grove State PA Zip Code 19090  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Couba Travel Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11545**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**B. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1025.64

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 02 / 2021  
**Transaction ID : SA11AI.11146**  
 Amount of Each Receipt this Period  
 1025.64  
 Memo Item

**C. Cruse, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 787 Armada Ter  
 City San Diego State CA Zip Code 92106  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Balboa Travel Occupation (for Individual) Chief Operating Officer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11724**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1332.05
<b>TOTAL</b> 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 89
	<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. Cunningham, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38122 Major Oak Alley  
 City Prairieville State LA Zip Code 70769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Paradise Vacation Escapes Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 08 / 25 / 2021  
**Transaction ID : SA11AI.11246**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**B. Cunningham, Shannon, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 38122 Major Oak Alley  
 City Prairieville State LA Zip Code 70769  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Paradise Vacation Escapes Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt 10 / 19 / 2021  
**Transaction ID : SA11AI.11524**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Currie, Betty, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8 Albemarle Dr NW  
 City Atlanta State GA Zip Code 30327  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Currie & Co. Travels Unlimited Occupation (for Individual) Founder  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt 10 / 09 / 2021  
**Transaction ID : SA11AI.11473**  
 Amount of Each Receipt this Period 512.82  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	717.94
<b>TOTAL</b> 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 89
<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 710.25

Date of Receipt 08 / 24 / 2021  
**Transaction ID : SA11AI.11231**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**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) GetAway Travel LLC Occupation (for Individual) Owner/Agent  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt 08 / 24 / 2021  
**Transaction ID : SA11AI.11207**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**C. 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) GetAway Travel LLC Occupation (for Individual) Owner/Agent  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt 09 / 24 / 2021  
**Transaction ID : SA11AI.11432**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	351.28
<b>TOTAL</b> 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 89
	<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.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
de Perez, Laurie, , ,

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) GetAway Travel LLC	Occupation (for Individual) Owner/Agent
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2021

**Transaction ID : SA11AI.11688**

Amount of Each Receipt this Period  
25.64

Memo Item

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
de Perez, Laurie, , ,

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) GetAway Travel LLC	Occupation (for Individual) Owner/Agent
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
282.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2021

**Transaction ID : SA11AI.11790**

Amount of Each Receipt this Period  
25.64

Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
de Perez, Laurie, , ,

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) GetAway Travel LLC	Occupation (for Individual) Owner/Agent
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify)

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2021

**Transaction ID : SA11AI.11830**

Amount of Each Receipt this Period  
25.64

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.92
<b>TOTAL</b> 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 89
	<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. Deppisch, Lara, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 220 Division St  
 City Waite Park State MN Zip Code 56387  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Bursch Travel Agency, Inc. Occupation (for Individual) Vice President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 08 / 2021  
**Transaction ID : SA11AI.11158**  
 Amount of Each Receipt this Period  
 500.00  
 Memo Item

**B. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2021  
**Transaction ID : SA11AI.11136**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

**C. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2021  
**Transaction ID : SA11AI.11278**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	551.28
<b>TOTAL</b> 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 89
	<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. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2021  
**Transaction ID : SA11AI.11443**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**B. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2021  
**Transaction ID : SA11AI.11707**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**C. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 29 / 2021  
**Transaction ID : SA11AI.11799**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.92
<b>TOTAL</b> 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 89
	<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. Dimit, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address P.O. Box 10607  
 City Fort Wayne State IN Zip Code 46853  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Getaway Layaway Vacations Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 333.32

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2021  
**Transaction ID : SA11AI.11839**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**B. Donati, Gina, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 145 Mats View Ter  
 City Port Ludlow State WA Zip Code 98365  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) An Epicurean Voyage, LLC Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.69

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 18 / 2021  
**Transaction ID : SA11AI.11195**  
 Amount of Each Receipt this Period 307.69  
 Memo Item

**C. Dyer, Kerry, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7419 Colgate Ave  
 City Dallas State TX Zip Code 75225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Brownell Travel Occupation (for Individual) Vice President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 384.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2021  
**Transaction ID : SA11AI.11109**  
 Amount of Each Receipt this Period 5.12  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	338.45
<b>TOTAL</b> 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 89
	<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. Dyer, Kerry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7419 Colgate Ave

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel	Occupation (for Individual) Vice President
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
389.96

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	12	/	2021

**Transaction ID : SA11AI.11180**

Amount of Each Receipt this Period  
5.12

Memo Item

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

Mailing Address 7419 Colgate Ave

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel	Occupation (for Individual) Vice President
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
395.08

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	12	/	2021

**Transaction ID : SA11AI.11402**

Amount of Each Receipt this Period  
5.12

Memo Item

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

Mailing Address 7419 Colgate Ave

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel	Occupation (for Individual) Vice President
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.20

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	12	/	2021

**Transaction ID : SA11AI.11492**

Amount of Each Receipt this Period  
5.12

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	15.36
<b>TOTAL</b> 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 89
<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. Dyer, Kerry, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 7419 Colgate Ave

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel	Occupation (for Individual) Vice President
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
405.32

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2021

**Transaction ID : SA11AI.11755**

Amount of Each Receipt this Period  
5.12

Memo Item

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

Mailing Address 7419 Colgate Ave

City Dallas	State TX	Zip Code 75225
----------------	-------------	-------------------

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

Name of Employer (for Individual) Brownell Travel	Occupation (for Individual) Vice President
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.44

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	12	/	2021

**Transaction ID : SA11AI.11821**

Amount of Each Receipt this Period  
5.12

Memo Item

**C. 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:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
562.82

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07	/	28	/	2021

**Transaction ID : SA11AI.11974**

Amount of Each Receipt this Period  
50.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	60.24
<b>TOTAL</b> 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 89
	<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. Ezrilov, Richard, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6625 Lyndale Ave South  
 Suite 104  
 City Minneapolis State MN Zip Code 55423  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Carrousel Travel Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt 11 / 18 / 2021  
**Transaction ID : SA11AI.11786**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**B. Ford, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 791 Inverness Dr  
 City Aurora State IL Zip Code 60504  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) AIG Travel Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 253.84

Date of Receipt 11 / 05 / 2021  
**Transaction ID : SA11AI.11726**  
 Amount of Each Receipt this Period 153.84  
 Memo Item

**C. Friedman, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6565 N. MacArthur Blvd  
 Suite 400  
 City Irving State TX Zip Code 75039  
 FEC ID number of contributing federal political committee. C  
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 3011.30

Date of Receipt 07 / 09 / 2021  
**Transaction ID : SA11AI.11106**  
 Amount of Each Receipt this Period 417.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	827.25
<b>TOTAL</b> 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 89
	<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 6565 N. MacArthur Blvd  
 Suite 400  
 City Irving State TX Zip Code 75039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3428.30

Date of Receipt  
 08 / 09 / 2021  
**Transaction ID : SA11AI.11159**  
 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 6565 N. MacArthur Blvd  
 Suite 400  
 City Irving State TX Zip Code 75039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 3478.30

Date of Receipt  
 08 / 17 / 2021  
**Transaction ID : SA11AI.11992**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Friedman, Jackie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6565 N. MacArthur Blvd  
 Suite 400  
 City Irving State TX Zip Code 75039  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Nexion Travel Group Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 3895.30

Date of Receipt  
 09 / 09 / 2021  
**Transaction ID : SA11AI.11369**  
 Amount of Each Receipt this Period  
 417.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	884.00
<b>TOTAL</b> 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 89
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Friedman, Jackie, , ,</b>		Date of Receipt
Mailing Address 6565 N. MacArthur Blvd Suite 400		<input type="text" value="10"/> / <input type="text" value="09"/> / <input type="text" value="2021"/>
City Irving	State TX	Zip Code 75039
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11471</b>
Name of Employer (for Individual) Nexion Travel Group		Amount of Each Receipt this Period <input type="text" value="417.00"/>
Occupation (for Individual) President		<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4312.30"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Friedman, Jackie, , ,</b>		Date of Receipt
Mailing Address 6565 N. MacArthur Blvd Suite 400		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2021"/>
City Irving	State TX	Zip Code 75039
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11731</b>
Name of Employer (for Individual) Nexion Travel Group		Amount of Each Receipt this Period <input type="text" value="256.41"/>
Occupation (for Individual) President		<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="4568.71"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Friedman, Jackie, , ,</b>		Date of Receipt
Mailing Address 6565 N. MacArthur Blvd Suite 400		<input type="text" value="11"/> / <input type="text" value="09"/> / <input type="text" value="2021"/>
City Irving	State TX	Zip Code 75039
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.11748</b>
Name of Employer (for Individual) Nexion Travel Group		Amount of Each Receipt this Period <input type="text" value="417.00"/>
Occupation (for Individual) President		<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="4985.71"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1090.41"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text"/>

**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 89
	<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. Geiser, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4540 Campus Dr.  
Suite 127

City Newport Beach	State CA	Zip Code 92660
-----------------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 10 / 2021

**Transaction ID : SA11AI.11107**

Amount of Each Receipt this Period  
51.28

Memo Item

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

Mailing Address 4540 Campus Dr.  
Suite 127

City Newport Beach	State CA	Zip Code 92660
-----------------------	-------------	-------------------

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

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

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
357.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 27 / 2021

**Transaction ID : SA11AI.11972**

Amount of Each Receipt this Period  
50.00

Memo Item

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

Mailing Address 4540 Campus Dr.  
Suite 127

City Newport Beach	State CA	Zip Code 92660
-----------------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
408.96

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 10 / 2021

**Transaction ID : SA11AI.11170**

Amount of Each Receipt this Period  
51.28

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	152.56
<b>TOTAL</b> 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 89
	<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 4540 Campus Dr.  
 Suite 127  
 City Newport Beach State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Uniglobe Travel Center Occupation (for Individual) Vice President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 460.24

Date of Receipt  
 09 / 10 / 2021  
**Transaction ID : SA11AI.11379**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

**B. Geiser, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Campus Dr.  
 Suite 127  
 City Newport Beach State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Uniglobe Travel Center Occupation (for Individual) Vice President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 511.52

Date of Receipt  
 10 / 10 / 2021  
**Transaction ID : SA11AI.11478**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

**C. Geiser, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 4540 Campus Dr.  
 Suite 127  
 City Newport Beach State CA Zip Code 92660  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Uniglobe Travel Center Occupation (for Individual) Vice President  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 562.80

Date of Receipt  
 11 / 10 / 2021  
**Transaction ID : SA11AI.11751**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	153.84
<b>TOTAL</b> 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 89
	<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. Geiser, Elizabeth, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4540 Campus Dr.  
Suite 127

City Newport Beach	State CA	Zip Code 92660
-----------------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
614.08

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 10 / 2021

**Transaction ID : SA11AI.11818**

Amount of Each Receipt this Period  
51.28

Memo Item

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

Mailing Address 27881 Lakehills Drive

City Franklin	State MI	Zip Code 48025
------------------	-------------	-------------------

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

Name of Employer (for Individual) Cuture Traveler	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2021

**Transaction ID : SA11AI.11727**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 27881 Lakehills Drive

City Franklin	State MI	Zip Code 48025
------------------	-------------	-------------------

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

Name of Employer (for Individual) Cuture Traveler	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 20 / 2021

**Transaction ID : SA11AI.11788**

Amount of Each Receipt this Period  
51.28

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	205.12
<b>TOTAL</b> 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 89
<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. George, Kareem, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 27881 Lakehills Drive

City Franklin	State MI	Zip Code 48025
------------------	-------------	-------------------

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

Name of Employer (for Individual) Cuture Traveler	Occupation (for Individual) Owner
--	--------------------------------------

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
358.96

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12	/	20	/	2021

**Transaction ID : SA11AI.11825**

Amount of Each Receipt this Period  
51.28

Memo Item

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

Mailing Address 301 S. Central Ave.

City Glager Beach	State FL	Zip Code 32137
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Gerling Travel	Occupation (for Individual) Travel Advisor
---	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.41

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	08	/	2021

**Transaction ID : SA11AI.11368**

Amount of Each Receipt this Period  
256.41

Memo Item

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

Mailing Address 26760 Tin Top School Road

City Mechanicsville	State MD	Zip Code 20659
------------------------	-------------	-------------------

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

Name of Employer (for Individual) Sunbreeze Travel	Occupation (for Individual) Independent Contractor
---	---

Receipt For: 2022  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
205.12

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2021

**Transaction ID : SA11AI.11556**

Amount of Each Receipt this Period  
102.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	410.25
<b>TOTAL</b> 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 28 OF 89
<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. Golson, Lillie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1002 Anne Street  
 City Takoma Park State MD Zip Code 20912  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Self-Employed Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11521**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

**B. 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) ADTRAV Travel Management Occupation (for Individual) Travel Agt-Corp  
 Receipt For: 2022  
 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  
 07 / 26 / 2021  
**Transaction ID : SA11AI.11038**  
 Amount of Each Receipt this Period  
 104.00  
 Memo Item

**C. Hale, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1076.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 19 / 2021  
**Transaction ID : SA11AI.11117**  
 Amount of Each Receipt this Period  
 153.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	360.40
<b>TOTAL</b> 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 29 OF 89
	<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. Hale, Lisa, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1230.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	19	/	2021

**Transaction ID : SA11AI.11196**

Amount of Each Receipt this Period  
153.84

Memo Item

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

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1282.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	24	/	2021

**Transaction ID : SA11AI.11220**

Amount of Each Receipt this Period  
51.28

Memo Item

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

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1507.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2021

**Transaction ID : SA11AI.11423**

Amount of Each Receipt this Period  
225.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	430.12
<b>TOTAL</b> 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 30 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Hale, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1732.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11501**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item

**B. Hale, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1957.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2021  
**Transaction ID : SA11AI.11787**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item

**C. Hale, Lisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2182.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 19 / 2021  
**Transaction ID : SA11AI.11824**  
 Amount of Each Receipt this Period  
 225.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<b>TOTAL</b> 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 31 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A. Hale, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1076.88

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 29 / 2021  
**Transaction ID : SA11AI.11137**  
 Amount of Each Receipt this Period  
 153.84  
 Memo Item

**B. Hale, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1128.16

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2021  
**Transaction ID : SA11AI.11223**  
 Amount of Each Receipt this Period  
 51.28  
 Memo Item

**C. Hale, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1282.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2021  
**Transaction ID : SA11AI.11279**  
 Amount of Each Receipt this Period  
 153.84  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	358.96
<b>TOTAL</b> 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 32 OF 89
<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. Hale, Robert, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1507.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2021

**Transaction ID : SA11AI.11444**

Amount of Each Receipt this Period  
225.00

Memo Item

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

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1732.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		29		2021

**Transaction ID : SA11AI.11708**

Amount of Each Receipt this Period  
225.00

Memo Item

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

Mailing Address 15285 E 7th Circle

City Aurora	State CO	Zip Code 80011
----------------	-------------	-------------------

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

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

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1957.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		29		2021

**Transaction ID : SA11AI.11800**

Amount of Each Receipt this Period  
225.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	675.00
<b>TOTAL</b> 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 33 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Hale, Robert, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 15285 E 7th Circle  
 City Aurora State CO Zip Code 80011  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel N Relax Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2182.00

Date of Receipt 12 / 29 / 2021  
**Transaction ID : SA11AI.11840**  
 Amount of Each Receipt this Period 225.00  
 Memo Item

**B. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 5000.00

Date of Receipt 07 / 15 / 2021  
**Transaction ID : SA11AI.11115**  
 Amount of Each Receipt this Period 5000.00  
 Memo Item

**C. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2500.00

Date of Receipt 07 / 14 / 2021  
**Transaction ID : SA11AI.11114**  
 Amount of Each Receipt this Period 2500.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	7725.00
<b>TOTAL</b> 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 34 OF 89
<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. Hershberger, David, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 9887 Montgomery Rd

City Montgomery	State OH	Zip Code 45242
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Prestige Travel Leaders Inc	Occupation (for Individual) President
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1102.56

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2021

**Transaction ID : SA11AI.11735**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 425 East Stateville Avenue Suite 101

City Morseville	State SC	Zip Code 28117
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Gifted Travel Network	Occupation (for Individual) Founder
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
306.41

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2021

**Transaction ID : SA11AI.11502**

Amount of Each Receipt this Period  
256.41

Memo Item

**C. 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: 2022  
 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
07	/	26	/	2021

**Transaction ID : SA11AI.11044**

Amount of Each Receipt this Period  
104.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	462.97
<b>TOTAL</b> 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 35 OF 89
<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. Ilves, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 S Lake Ave  
 Ste 280  
 City Pasadena State CA Zip Code 91101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TravelStore Occupation (for Individual) SVP, Leisure Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 205.12

Date of Receipt  
 08 / 09 / 2021  
**Transaction ID : SA11AI.11167**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

**B. Ilves, Daniel, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 140 S Lake Ave  
 Ste 280  
 City Pasadena State CA Zip Code 91101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) TravelStore Occupation (for Individual) SVP, Leisure Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 307.68

Date of Receipt  
 09 / 10 / 2021  
**Transaction ID : SA11AI.11385**  
 Amount of Each Receipt this Period  
 102.56  
 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: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 1128.20

Date of Receipt  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11740**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.68
<b>TOTAL</b> 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 36 OF 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 551.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 12 / 2021  
**Transaction ID : SA11AI.11108**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

**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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 613.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2021  
**Transaction ID : SA11AI.11179**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

**C. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 12 / 2021  
**Transaction ID : SA11AI.11401**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	186.00
<b>TOTAL</b> 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 37 OF 89
	<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. 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: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 737.94

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 12 / 2021  
**Transaction ID : SA11AI.11491**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

**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: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 840.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11723**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. 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: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 902.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2021  
**Transaction ID : SA11AI.11754**  
 Amount of Each Receipt this Period 62.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	226.56
<b>TOTAL</b> 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 38 OF 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 964.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 12 / 2021  
**Transaction ID : SA11AI.11820**  
 Amount of Each Receipt this Period  
 62.00  
 Memo Item

**B. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 07 / 2021  
**Transaction ID : SA11AI.11422**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**C. Kraemer, Neal, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6625 Lyndale Ave South Suite 104  
 City Minneapolis State MN Zip Code 55423  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Carrousel Travel Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 13 / 2021  
**Transaction ID : SA11AI.11756**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	831.23
<b>TOTAL</b> 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 39 OF 89
<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. Landis, Geoffrey, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 66467 SR 15  
 City Goshen State IN Zip Code 46526  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Menno Travel/ Branch of Tzell Travel G Occupation (for Individual) President/CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 15 / 2021  
**Transaction ID : SA11AI.11414**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**B. 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: 2022  
 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  
 07 / 26 / 2021  
**Transaction ID : SA11AI.11058**  
 Amount of Each Receipt this Period  
 104.00  
 Memo Item

**C. 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:  
 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  
 07 / 14 / 2021  
**Transaction ID : SA11AI.11960**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	666.82
<b>TOTAL</b> 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 40 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Lee, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Erie Ct  
 City Winter Springs State FL Zip Code 32708-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2021  
**Transaction ID : SA11AI.11247**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Lee, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Erie Ct  
 City Winter Springs State FL Zip Code 32708-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 26 / 2021  
**Transaction ID : SA11AI.11435**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Lee, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Erie Ct  
 City Winter Springs State FL Zip Code 32708-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 26 / 2021  
**Transaction ID : SA11AI.11696**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	300.00
<b>TOTAL</b> 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 41 OF 89
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A. Lee, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Erie Ct  
 City Winter Springs State FL Zip Code 32708-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 590.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 26 / 2021  
**Transaction ID : SA11AI.11793**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**B. Lee, Jennifer, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1100 Erie Ct  
 City Winter Springs State FL Zip Code 32708-5513  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Planners International Occupation (for Individual) VP of Sales and Marketing  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 26 / 2021  
**Transaction ID : SA11AI.11832**  
 Amount of Each Receipt this Period  
 100.00  
 Memo Item

**C. Lennon, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3801 Ponce de Leon Blvd  
 City Coral Gables State FL Zip Code 33134  
 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: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 246.56

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11515**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	302.56
<b>TOTAL</b> 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 42 OF 89
	<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. Lennon, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3801 Ponce de Leon Blvd  
 City Coral Gables State FL Zip Code 33134  
 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 262.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2021  
**Transaction ID : SA11AI.11703**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**B. Lennon, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3801 Ponce de Leon Blvd  
 City Coral Gables State FL Zip Code 33134  
 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 278.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 29 / 2021  
**Transaction ID : SA11AI.11796**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

**C. Lennon, Lee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3801 Ponce de Leon Blvd  
 City Coral Gables State FL Zip Code 33134  
 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 294.56

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 12 / 29 / 2021  
**Transaction ID : SA11AI.11835**  
 Amount of Each Receipt this Period 16.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	48.00
<b>TOTAL</b> 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 43 OF 89
<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. 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 92706-3548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CTA Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2021  
**Transaction ID : SA11AI.11390**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**B. 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 92706-3548  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) CTA Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 2769.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 06 / 2021  
**Transaction ID : SA11AI.11741**  
 Amount of Each Receipt this Period  
 2256.41  
 Memo Item

**C. Lewis, Pamela, , ,**  
 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: 2022  
 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  
 07 / 26 / 2021  
**Transaction ID : SA11AI.11062**  
 Amount of Each Receipt this Period  
 104.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	2873.23
<b>TOTAL</b> 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 44 OF 89
<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. Lovell, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2777 E Paris Ave SE  
 City Grand Rapids State MI Zip Code 49546  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Breton Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 512.82

Date of Receipt 09 / 10 / 2021  
**Transaction ID : SA11AI.11386**  
 Amount of Each Receipt this Period 512.82  
 Memo Item

**B. Martin, Brandee, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 757 Du Page Blvd Unit 3160  
 City Glen Ellyn State IL Zip Code 60138  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Silver Foxes Travel Consulting Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt 08 / 24 / 2021  
**Transaction ID : SA11AI.11233**  
 Amount of Each Receipt this Period 300.00  
 Memo Item

**C. Martindale, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 427 9th Ave Suite 405  
 City San Diego State CA Zip Code 92101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cruise Planners Occupation (for Individual) Independent Contractor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.10

Date of Receipt 11 / 07 / 2021  
**Transaction ID : SA11AI.11742**  
 Amount of Each Receipt this Period 41.02  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	853.84
<b>TOTAL</b> 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 45 OF 89
	<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. Martindale, Adam, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 427 9th Ave  
 Suite 405  
 City San Diego State CA Zip Code 92101  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Cruise Planners Occupation (for Individual) Independent Contractor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 246.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 07 / 2021  
**Transaction ID : SA11AI.11816**  
 Amount of Each Receipt this Period  
 41.02  
 Memo Item

**B. Maryanov, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 S Barrington Ave  
 Ste 316  
 City Los Angeles State CA Zip Code 90025-5379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2138.73

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 17 / 2021  
**Transaction ID : SA11AI.11116**  
 Amount of Each Receipt this Period  
 358.97  
 Memo Item

**C. Maryanov, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 S Barrington Ave  
 Ste 316  
 City Los Angeles State CA Zip Code 90025-5379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2261.80

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2021  
**Transaction ID : SA11AI.11127**  
 Amount of Each Receipt this Period  
 123.07  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	523.06
<b>TOTAL</b> 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 46 OF 89
	<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. Maryanov, Eric, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2001 S Barrington Ave  
 Ste 316  
 City Los Angeles State CA Zip Code 90025-5379  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All Travel Occupation (for Individual) President  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 2774.62

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11722**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**B. Mazza, Jim, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 71 Audrey Ave  
 City Oyster Bay State NY Zip Code 11771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Savers Occupation (for Individual) COO  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1538.46

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2021  
**Transaction ID : SA11AI.11185**  
 Amount of Each Receipt this Period  
 1538.46  
 Memo Item

**C. Mazza, Rick, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 71 Audrey Ave  
 City Oyster Bay State NY Zip Code 11771  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Savers Occupation (for Individual) CEO  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1538.46

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 12 / 2021  
**Transaction ID : SA11AI.11184**  
 Amount of Each Receipt this Period  
 1538.46  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	3589.74
<b>TOTAL</b> 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 47 OF 89
	<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. McGovern, Vanessa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 E Statesville Avenue  
 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 & Chief Sales Officer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 255.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11578**  
 Amount of Each Receipt this Period  
 102.56  
 Memo Item

**B. McGovern, Vanessa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 425 E Statesville Avenue  
 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 & Chief Sales Officer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 511.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11730**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**C. 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 Occupation (for Individual) Mgr. Tech & Finance  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 506.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2021  
**Transaction ID : SA11AI.11213**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.38
<b>TOTAL</b> 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 48 OF 89
<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: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		23		2021

**Transaction ID : SA11AI.11125**

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: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		23		2021

**Transaction ID : SA11AI.11204**

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: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
85.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		23		2021

**Transaction ID : SA11AI.11429**

Amount of Each Receipt this Period  

85.00
-------

 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	255.00
<b>TOTAL</b> 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 49 OF 89
	<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. Meader, Mark, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1533 Independence Avenue SE

City Washington	State DC	Zip Code 20003-1548
--------------------	-------------	------------------------

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

Name of Employer (for Individual) Amer. Soc. of Travel Advisors	Occupation (for Individual) SVP Industry Affairs
--	---

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
850.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		23		2021

**Transaction ID : SA11AI.11674**

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: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
935.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		23		2021

**Transaction ID : SA11AI.11789**

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: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1020.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		23		2021

**Transaction ID : SA11AI.11829**

Amount of Each Receipt this Period  
85.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	255.00
<b>TOTAL</b> 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 50 OF 89
	<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. Metzger, Cassandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1177 22nd Street NW  
 Unit 7A  
 City Washington State DC Zip Code 20037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Premier Wellness Travel Occupation (for Individual) Luxury Travel Designer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1012.82

Date of Receipt  
 08 / 12 / 2021  
**Transaction ID : SA11AI.11183**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**B. Metzger, Cassandra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1177 22nd Street NW  
 Unit 7A  
 City Washington State DC Zip Code 20037  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Premier Wellness Travel Occupation (for Individual) Luxury Travel Designer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1525.64

Date of Receipt  
 08 / 24 / 2021  
**Transaction ID : SA11AI.11215**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**C. Nall, Timothy, , ,**  
 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 208.00

Date of Receipt  
 07 / 26 / 2021  
**Transaction ID : SA11AI.11072**  
 Amount of Each Receipt this Period  
 104.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1129.64
<b>TOTAL</b> 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 51 OF 89
	<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. O'Connell, Colleen, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1515 Oakland Blvd  
Ste 100

City Walnut Creek State CA Zip Code 94596

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

Name of Employer (for Individual) Travel Adventures Unlimited Occupation (for Individual) Owner

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.69

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2021

**Transaction ID : SA11AI.11394**

Amount of Each Receipt this Period  
 307.69

Memo Item

**B. 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 Occupation (for Individual) Senior Vice President

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1012.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 17 / 2021

**Transaction ID : SA11AI.11193**

Amount of Each Receipt this Period  
 512.82

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 Occupation (for Individual) Senior Vice President

Receipt For: 2022  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
1115.38

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021

**Transaction ID : SA11AI.11513**

Amount of Each Receipt this Period  
 102.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	923.07
<b>TOTAL</b> 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 52 OF 89
<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. Paugh, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1240 US Hwy 1 Ste 6  
 City Rockledge State FL Zip Code 32955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All About You Travel Unlimited Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 717.92

Date of Receipt **07 / 24 / 2021**  
**Transaction ID : SA11AI.11129**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**B. Paugh, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1240 US Hwy 1 Ste 6  
 City Rockledge State FL Zip Code 32955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All About You Travel Unlimited Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 820.48

Date of Receipt **08 / 24 / 2021**  
**Transaction ID : SA11AI.11208**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

**C. Paugh, Jean, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1240 US Hwy 1 Ste 6  
 City Rockledge State FL Zip Code 32955  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) All About You Travel Unlimited Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 923.04

Date of Receipt **09 / 24 / 2021**  
**Transaction ID : SA11AI.11433**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	307.68
<b>TOTAL</b> 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 53 OF 89
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A. Paugh, Jean, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1240 US Hwy 1 Ste 6

City Rockledge	State FL	Zip Code 32955
-------------------	-------------	-------------------

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

Name of Employer (for Individual) All About You Travel Unlimited	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1025.60

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		24		2021

**Transaction ID : SA11AI.11689**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 1240 US Hwy 1 Ste 6

City Rockledge	State FL	Zip Code 32955
-------------------	-------------	-------------------

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

Name of Employer (for Individual) All About You Travel Unlimited	Occupation (for Individual) Owner
---	--------------------------------------

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1128.16

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2021

**Transaction ID : SA11AI.11791**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 1240 US Hwy 1 Ste 6

City Rockledge	State FL	Zip Code 32955
-------------------	-------------	-------------------

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

Name of Employer (for Individual) All About You Travel Unlimited	Occupation (for Individual) Owner
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Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1230.72

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
12		24		2021

**Transaction ID : SA11AI.11831**

Amount of Each Receipt this Period  
102.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	307.68
<b>TOTAL</b> 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 54 OF 89
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Peck, Eben, , ,</b>			Date of Receipt MM / DD / YYYY 07 / 29 / 2021 <b>Transaction ID : SA11AI.11138</b>
Mailing Address 675 N Washington St Ste 490			Amount of Each Receipt this Period 87.17
City Alexandria	State VA	Zip Code 22314-1940	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors		Occupation (for Individual) EVP, Advocacy	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 610.19		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Peck, Eben, , ,</b>			Date of Receipt MM / DD / YYYY 08 / 09 / 2021 <b>Transaction ID : SA11AI.11986</b>
Mailing Address 675 N Washington St Ste 490			Amount of Each Receipt this Period 50.00
City Alexandria	State VA	Zip Code 22314-1940	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors		Occupation (for Individual) EVP, Advocacy	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.19		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Peck, Eben, , ,</b>			Date of Receipt MM / DD / YYYY 08 / 29 / 2021 <b>Transaction ID : SA11AI.11280</b>
Mailing Address 675 N Washington St Ste 490			Amount of Each Receipt this Period 87.17
City Alexandria	State VA	Zip Code 22314-1940	
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors		Occupation (for Individual) EVP, Advocacy	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 747.36		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	224.34
<b>TOTAL</b> 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 55 OF 89
	<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Peck, Eben, , ,</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2021 <b>Transaction ID : SA11AI.11445</b>
Mailing Address 675 N Washington St Ste 490		Amount of Each Receipt this Period 87.17
City Alexandria	State VA	Zip Code 22314-1940
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) EVP, Advocacy	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 834.53	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Peck, Eben, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 20 / 2021 <b>Transaction ID : SA11AI.11663</b>
Mailing Address 675 N Washington St Ste 490		Amount of Each Receipt this Period 25.64
City Alexandria	State VA	Zip Code 22314-1940
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) EVP, Advocacy	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 860.17	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Peck, Eben, , ,</b>		Date of Receipt MM / DD / YYYY 10 / 29 / 2021 <b>Transaction ID : SA11AI.11709</b>
Mailing Address 675 N Washington St Ste 490		Amount of Each Receipt this Period 87.17
City Alexandria	State VA	Zip Code 22314-1940
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Am. Soc. of Travel Advisors	Occupation (for Individual) EVP, Advocacy	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 947.34	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	199.98
<b>TOTAL</b> 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 56 OF 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 998.62

Date of Receipt  
 11 / 05 / 2021  
**Transaction ID : SA11AI.11725**  
 Amount of Each Receipt this Period  
 51.28  
 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1085.79

Date of Receipt  
 11 / 29 / 2021  
**Transaction ID : SA11AI.11801**  
 Amount of Each Receipt this Period  
 87.17  
 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) Am. Soc. of Travel Advisors Occupation (for Individual) EVP, Advocacy  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 1172.96

Date of Receipt  
 12 / 29 / 2021  
**Transaction ID : SA11AI.11841**  
 Amount of Each Receipt this Period  
 87.17  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	225.62
<b>TOTAL</b> 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 57 OF 89
	<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. Peters, Mary, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8432 Old Keene Mill Road  
 49608425  
 City Springfield State VA Zip Code 22152  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Friendly Travel Inc. Occupation (for Individual) President  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11522**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

**B. Peterson, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 Main St  
 #105  
 City St. Paul State MN Zip Code 55118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Leaders Group Occupation (for Individual) Director, Finance  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 203.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 07 / 23 / 2021  
**Transaction ID : SA11AI.11965**  
 Amount of Each Receipt this Period  
 50.00  
 Memo Item

**C. Peterson, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 Main St  
 #105  
 City St. Paul State MN Zip Code 55118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Leaders Group Occupation (for Individual) Director, Finance  
 Receipt For: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼  
 224.33

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 13 / 2021  
**Transaction ID : SA11AI.11186**  
 Amount of Each Receipt this Period  
 20.51  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	583.33
<b>TOTAL</b> 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 58 OF 89
	<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. Peterson, Virginia, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 750 Main St  
#105

City St. Paul	State MN	Zip Code 55118
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Travel Leaders Group	Occupation (for Individual) Director, Finance
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.33

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2021

**Transaction ID : SA11AI.11219**

Amount of Each Receipt this Period  
16.00

Memo Item

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

Mailing Address 750 Main St  
#105

City St. Paul	State MN	Zip Code 55118
------------------	-------------	-------------------

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

Name of Employer (for Individual) Travel Leaders Group	Occupation (for Individual) Director, Finance
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
260.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		13		2021

**Transaction ID : SA11AI.11403**

Amount of Each Receipt this Period  
20.51

Memo Item

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

Mailing Address 750 Main St  
#105

City St. Paul	State MN	Zip Code 55118
------------------	-------------	-------------------

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

Name of Employer (for Individual) Travel Leaders Group	Occupation (for Individual) Director, Finance
---	--

Receipt For: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
276.84

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2021

**Transaction ID : SA11AI.11434**

Amount of Each Receipt this Period  
16.00

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	52.51
<b>TOTAL</b> 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 59 OF 89
	<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. Peterson, Virginia, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 750 Main St #105  
 City St. Paul State MN Zip Code 55118  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Travel Leaders Group Occupation (for Individual) Director, Finance  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.48

Date of Receipt 10 / 19 / 2021  
**Transaction ID : SA11AI.11595**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**B. Phillippi, Lynda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 811  
 City McMinnville State OR Zip Code 97128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renaissance Travel and Events Occupation (for Individual) Professional Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.97

Date of Receipt 08 / 09 / 2021  
**Transaction ID : SA11AI.11162**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

**C. Phillippi, Lynda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address PO Box 811  
 City McMinnville State OR Zip Code 97128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Renaissance Travel and Events Occupation (for Individual) Professional Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 461.53

Date of Receipt 10 / 19 / 2021  
**Transaction ID : SA11AI.11559**  
 Amount of Each Receipt this Period 102.56  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	384.61
<b>TOTAL</b> 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 60 OF 89
	<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. Phillips, Shelly, , ,**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 11929 Hearthstone Lane

City Birmingham	State AL	Zip Code 35111
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Travel by That Girl	Occupation (for Individual) Independent Agent
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
307.68

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
07		01		2021

**Transaction ID : SA11AI.11099**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 11929 Hearthstone Lane

City Birmingham	State AL	Zip Code 35111
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Travel by That Girl	Occupation (for Individual) Independent Agent
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.24

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09		02		2021

**Transaction ID : SA11AI.11357**

Amount of Each Receipt this Period  
102.56

Memo Item

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

Mailing Address 11929 Hearthstone Lane

City Birmingham	State AL	Zip Code 35111
--------------------	-------------	-------------------

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

Name of Employer (for Individual) Travel by That Girl	Occupation (for Individual) Independent Agent
--	--

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
543.57

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10		27		2021

**Transaction ID : SA11AI.11698**

Amount of Each Receipt this Period  
133.33

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	338.45
<b>TOTAL</b> 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 61 OF 89
<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Pickett, Russell, , ,</b>			Date of Receipt
Mailing Address 2131 Westrivers Road			<input type="text" value="07"/> / <input type="text" value="28"/> / <input type="text" value="2021"/>
City Charleston	State SC	Zip Code 29412	<b>Transaction ID : SA11AI.11845</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="249.00"/>
Name of Employer (for Individual) Shellback Cruises, LLC		Occupation (for Individual) Owner	<input type="checkbox"/> Memo Item
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="249.00"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Placeres, Olga, , ,</b>			Date of Receipt
Mailing Address 5811 Pelican Bay Blvd. Suite 201			<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2021"/>
City Naples	State FL	Zip Code 34108	<b>Transaction ID : SA11AI.11815</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="51.28"/>
Name of Employer (for Individual) Preferred Travel Of Naples		Occupation (for Individual) CFO	<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="205.12"/>		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Porter, Angela, , ,</b>			Date of Receipt
Mailing Address 4555 Southlake Pkwy			<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2021"/>
City Birmingham	State AL	Zip Code 35244	<b>Transaction ID : SA11AI.11079</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="104.00"/>
Name of Employer (for Individual) ADTRAV		Occupation (for Individual) Travel Advisor	<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ <input type="text" value="208.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="404.28"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text"/>

**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 62 OF 89
	<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. Qualls, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Gascony Road  
 City Encinitas State CA Zip Code 92024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tasteful Voyages Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 08 / 25 / 2021  
**Transaction ID : SA11AI.11235**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

**B. Qualls, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Gascony Road  
 City Encinitas State CA Zip Code 92024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tasteful Voyages Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 820.50

Date of Receipt  
 10 / 29 / 2021  
**Transaction ID : SA11AI.11711**  
 Amount of Each Receipt this Period 615.38  
 Memo Item

**C. Qualls, Joan, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1736 Gascony Road  
 City Encinitas State CA Zip Code 92024  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Tasteful Voyages Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 871.78

Date of Receipt  
 11 / 25 / 2021  
**Transaction ID : SA11AI.11792**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	717.94
<b>TOTAL</b> 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 63 OF 89
<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Ramudo, Olga, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 30 / 2021 <b>Transaction ID : SA11AI.11288</b>
Mailing Address 299 Alhambra Cir Ste 501		Amount of Each Receipt this Period 300.00
City Coral Gables	State FL	Zip Code 33134
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Express Travel	Occupation (for Individual) President & CEO	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Reader, Eric, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 11 / 2021 <b>Transaction ID : SA11AI.11177</b>
Mailing Address 2440 Virginia Avenue NW		Amount of Each Receipt this Period 512.82
City Washington	State DC	Zip Code 20037
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Connoisseur Travel Ltd.	Occupation (for Individual) Executive Vice-President, Partner	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1025.64	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Rees, John, , ,</b>		Date of Receipt MM / DD / YYYY 08 / 24 / 2021 <b>Transaction ID : SA11AI.11216</b>
Mailing Address 153 Huntington Ridge PI		Amount of Each Receipt this Period 512.82
City Mooreville	State SC	Zip Code 28115-9100
FEC ID number of contributing federal political committee. C		<input type="checkbox"/> Memo Item
Name of Employer (for Individual) J5Travel	Occupation (for Individual) Owner	
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	Aggregate Year-to-Date ▼ 715.38	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1325.64
<b>TOTAL</b> 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 64 OF 89
	<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. Rees, John, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 153 Huntington Ridge Pl  
 City Mooresville State SC Zip Code 28115-9100  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) J5Travel Occupation (for Individual) Owner  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1741.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11537**  
 Amount of Each Receipt this Period  
 1025.64  
 Memo Item

**B. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 28 / 2021  
**Transaction ID : SA11AI.11273**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

**C. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.76

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 28 / 2021  
**Transaction ID : SA11AI.11437**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1076.92
<b>TOTAL</b> 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 65 OF 89
	<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. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.40

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 28 / 2021  
**Transaction ID : SA11AI.11700**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**B. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 28 / 2021  
**Transaction ID : SA11AI.11795**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**C. Rodriguez, Laura, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 7035 S Central Ave Ste 4  
 City Phoenix State AZ Zip Code 85042  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Marina Tours And Travel Arizon Occupation (for Individual) Owner/General Manager  
 Receipt For: 2022  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 28 / 2021  
**Transaction ID : SA11AI.11834**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.92
<b>TOTAL</b> 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 66 OF 89
	<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. Rothenberg, Stuart, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 277 Fairfield Road  
 City Fairfield State NJ Zip Code 07004-1900  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Information Requested Occupation (for Individual) Information Requested  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 369.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2021  
**Transaction ID : SA11AI.11389**  
 Amount of Each Receipt this Period 369.23  
 Memo Item

**B. Saburn, Sandy, , ,**  
 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) VP Membership  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 29 / 2021  
**Transaction ID : SA11AI.11440**  
 Amount of Each Receipt this Period 20.51  
 Memo Item

**C. Saburn, Sandy, , ,**  
 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) VP Membership  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 261.51

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11526**  
 Amount of Each Receipt this Period 51.28  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	441.02
<b>TOTAL</b> 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 67 OF 89
	<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. Saburn, Sandy, , ,**  
 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) VP Membership  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 282.02

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2021  
**Transaction ID : SA11AI.11704**  
 Amount of Each Receipt this Period  
 20.51  
 Memo Item

**B. Saburn, Sandy, , ,**  
 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) VP Membership  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 302.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 30 / 2021  
**Transaction ID : SA11AI.11803**  
 Amount of Each Receipt this Period  
 20.51  
 Memo Item

**C. Saburn, Sandy, , ,**  
 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) VP Membership  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 323.04

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2021  
**Transaction ID : SA11AI.11836**  
 Amount of Each Receipt this Period  
 20.51  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	61.53
<b>TOTAL</b> 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 68 OF 89
<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**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Sachs, Laney, , ,</b>			Date of Receipt
Mailing Address 14 Farm Hill Rd			<input type="text" value="08"/> / <input type="text" value="25"/> / <input type="text" value="2021"/>
City Stamford	State CT	Zip Code 06902	<b>Transaction ID : SA11AI.11250</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="102.56"/>
Name of Employer (for Individual) Ostensia Blu		Occupation (for Individual) Travel Advisor	<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="205.12"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Sanchez, Robin, , ,</b>			Date of Receipt
Mailing Address 3329 State Street			<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2021"/>
City Santa Barbara	State CA	Zip Code 93105	<b>Transaction ID : SA11AI.11267</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="256.41"/>
Name of Employer (for Individual) Your Travel Center, Inc.		Occupation (for Individual) VP, Operations	<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="256.41"/>	

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Schiefelbein, Jill, , ,</b>			Date of Receipt
Mailing Address 4110 Island Drive #503			<input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2021"/>
City North Topsail Beach	State NC	Zip Code 28460	<b>Transaction ID : SA11AI.11255</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="250.00"/>
Name of Employer (for Individual) The Dynamic Communicator		Occupation (for Individual) Travel Advisor	<input type="checkbox"/> Memo Item
Receipt For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="608.97"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 69 OF 89
	<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  
Seddelmeyer, Chris, , ,

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: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.41

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	13	/	2021

**Transaction ID : SA11AI.11187**

Amount of Each Receipt this Period  
256.41

Memo Item

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

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: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
512.82

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	19	/	2021

**Transaction ID : SA11AI.11592**

Amount of Each Receipt this Period  
256.41

Memo Item

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

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: 2022  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼  
615.38

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	16	/	2021

**Transaction ID : SA11AI.11782**

Amount of Each Receipt this Period  
102.56

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	615.38
<b>TOTAL</b> 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 70 OF 89
	<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. Smith, Marie, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 50 Pearl Road  
Suite 300

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) Group Department Manager

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
203.84

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021

**Transaction ID : SA11AI.11549**

Amount of Each Receipt this Period  
 25.64

Memo Item

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

Mailing Address 50 Pearl Road  
Suite 300

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) Group Department Manager

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
219.22

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 15 / 2021

**Transaction ID : SA11AI.11763**

Amount of Each Receipt this Period  
 15.38

Memo Item

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

Mailing Address 1100 Ocean Road (Route 88)

City Point Pleasant State NJ Zip Code 08742

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

Name of Employer (for Individual) TravelSmiths Occupation (for Individual) President & CEO

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2021

**Transaction ID : SA11AI.11388**

Amount of Each Receipt this Period  
 256.41

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	297.43
<b>TOTAL</b> 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 71 OF 89
	<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. Spencer-Gordon, Debra, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 2725 W Washington Blvd  
 City Chicago State IL Zip Code 60612  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Accent On Vacation Travel Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2021  
**Transaction ID : SA11AI.11716**  
 Amount of Each Receipt this Period  
 300.00  
 Memo Item

**B. Spinelli, Dave, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1605 S Congress Ave Suite 105-A  
 City Delray Beach State FL Zip Code 33445  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) InteleTravel.com Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 24 / 2021  
**Transaction ID : SA11AI.11222**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**C. 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: 2022  
 Primary  General  
 Other (specify)  
 Aggregate Year-to-Date ▼ 205.12

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 29 / 2021  
**Transaction ID : SA11AI.11281**  
 Amount of Each Receipt this Period  
 25.64  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	582.05
<b>TOTAL</b> 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 72 OF 89
	<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. 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: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.76

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	29	/	2021

**Transaction ID : SA11AI.11446**

Amount of Each Receipt this Period  
25.64

Memo Item

**B. 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: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.40

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2021

**Transaction ID : SA11AI.11710**

Amount of Each Receipt this Period  
25.64

Memo Item

**C. 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: 2022  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
282.04

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	29	/	2021

**Transaction ID : SA11AI.11802**

Amount of Each Receipt this Period  
25.64

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	76.92
<b>TOTAL</b> 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 73 OF 89
	<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. 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: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 307.68

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 12 / 29 / 2021  
**Transaction ID : SA11AI.11842**  
 Amount of Each Receipt this Period 25.64  
 Memo Item

**B. Strong, James, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 8235 Douglas Ave. Suite 1040  
 City Dallas State TX Zip Code 75225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Strong Travel Services, Inc. Occupation (for Individual) Travel Coordinator  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 769.23

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 22 / 2021  
**Transaction ID : SA11AI.11426**  
 Amount of Each Receipt this Period 769.23  
 Memo Item

**C. Summers, Joanne, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 6500 Holly Ave. NE Suite A-2  
 City Albuquerque State NM Zip Code 87113  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) Rio Grande Travel Centers Inc. Occupation (for Individual) CEO  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 10 / 2021  
**Transaction ID : SA11AI.11392**  
 Amount of Each Receipt this Period 256.41  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1051.28
<b>TOTAL</b> 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 74 OF 89
	<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. Taylor, Elisa, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 2945 Bell Rd  
# 256

City Auburn	State CA	Zip Code 95603
----------------	-------------	-------------------

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

Name of Employer (for Individual) World Less Traveled	Occupation (for Individual) Family Travel Specialist
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 25 / 2021

**Transaction ID : SA11AI.11241**

Amount of Each Receipt this Period  
256.41

Memo Item

**B. Tomlinson, Greg, , ,**  
 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) ADTRAV Travel Management	Occupation (for Individual) Travel Agent
---	---

Receipt For: 2022  
 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  
 07 / 26 / 2021

**Transaction ID : SA11AI.11091**

Amount of Each Receipt this Period  
104.00

Memo Item

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

Mailing Address 932 Iris Drive

City Delray Beach	State FL	Zip Code 33483
----------------------	-------------	-------------------

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

Name of Employer (for Individual) Tukel	Occupation (for Individual) Travel Advisor
--	---

Receipt For: 2022  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 08 / 2021

**Transaction ID : SA11AI.11744**

Amount of Each Receipt this Period  
256.41

Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	616.82
<b>TOTAL</b> 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 75 OF 89
	<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. Wallace, Angela, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 1401 Park Ave  
 Ste A  
 City Fernandina Beach State FL Zip Code 32034  
 Name of Employer (for Individual) Wallace Pierson Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 256.41

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 09 / 02 / 2021  
**Transaction ID : SA11AI.11356**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**B. Wallace, 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  
 Name of Employer (for Individual) ADA Travel Occupation (for Individual) Owner/Manager  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 261.53

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 08 / 09 / 2021  
**Transaction ID : SA11AI.11161**  
 Amount of Each Receipt this Period  
 261.53  
 Memo Item

**C. Webb Huggan, Melinda, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 44927 George Washington Blvd  
 Ste 265  
 City Ashburn State VA Zip Code 20147  
 Name of Employer (for Individual) Where Dreams Live Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 512.82

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11627**  
 Amount of Each Receipt this Period  
 512.82  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	1030.76
<b>TOTAL</b> 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 76 OF 89
	<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:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt **07 / 12 / 2021**  
**Transaction ID : SA11AI.11959**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

**B. Westerfield, Dasha, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 3303 Albans Rd  
 City Houston State TX Zip Code 77005  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) River Oaks Travel Occupation (for Individual) Travel Advisor  
 Receipt For: 2022  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 256.41

Date of Receipt **08 / 27 / 2021**  
**Transaction ID : SA11AI.11259**  
 Amount of Each Receipt this Period 256.41  
 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:  Primary  General  Other (specify)  
 Aggregate Year-to-Date ▼ 2550.00

Date of Receipt **08 / 12 / 2021**  
**Transaction ID : SA11AI.11987**  
 Amount of Each Receipt this Period 50.00  
 Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	356.41
<b>TOTAL</b> 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 77 OF 89
	<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. Young, Guy, , ,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 Mailing Address 58 East Brookside Drive  
 City Larchmont State NY Zip Code 10538  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer (for Individual) The Travel Corporation Occupation (for Individual) Chief Engagement Officer  
 Receipt For: 2022  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼ 358.97

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 19 / 2021  
**Transaction ID : SA11AI.11574**  
 Amount of Each Receipt this Period  
 256.41  
 Memo Item

**B. Zimmerman, Rick, , Mr.,**  
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
 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: 2022  
 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  
 08 / 02 / 2021  
**Transaction ID : SA11AI.11145**  
 Amount of Each Receipt this Period  
 5000.00  
 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

<b>SUBTOTAL</b> of Receipts This Page (optional).....	5256.41
<b>TOTAL</b> This Period (last page this line number only).....	62549.88

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

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

FOR LINE NUMBER: PAGE 78 OF 89  
(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 : SA17.11917**

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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="2952.95"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value="2952.95"/>

# 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 79 OF 89
<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 checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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

**A. FRIENDS OF ROY BLUNT**

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

Mailing Address PO BOX 10178

City COLUMBIA	State MO	Zip Code 65205
------------------	-------------	-------------------

FEC ID number of contributing federal political committee. **C** C00304758

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

Receipt For: 2022  
 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  
07 / 14 / 2021

**Transaction ID : SA16.11922**

Amount of Each Receipt this Period  
5000.00

Memo Item  
Refund of Candidate Committee Contribution

**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

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5000.00

**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 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) <b>A. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.11890</b> Amount of Each Disbursement this Period [REDACTED] 46.61	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [REDACTED]
Purpose of Disbursement Credit Card Processing		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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>B. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 07 / 31 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.11891</b> Amount of Each Disbursement this Period [REDACTED] 280.68	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [REDACTED]
Purpose of Disbursement Credit Card Processing		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input 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>C. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 08 / 31 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [REDACTED] <b>Transaction ID : SB21B.11892</b> Amount of Each Disbursement this Period [REDACTED] 1226.10	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [REDACTED]
Purpose of Disbursement Credit Card Processing		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="checkbox"/> Memo Item
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 1553.39
<b>TOTAL</b> 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**

**A. PNC Bank NA**

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.11893

Amount of Each Disbursement this Period: 0.67

Memo Item

**B. PNC Bank NA**

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.11894

Amount of Each Disbursement this Period: 3.67

Memo Item

**C. PNC Bank NA**

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 09 / 30 / 2021

FEC Identification Number: C

Transaction ID : SB21B.11895

Amount of Each Disbursement this Period: 381.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 385.34

**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 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) <b>A. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.11896</b> Amount of Each Disbursement this Period [ ] 353.11	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [ ]
Purpose of Disbursement Fees/Expenses LPL Fin		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>B. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 10 / 31 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.11897</b> Amount of Each Disbursement this Period [ ] 381.23	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

Full Name (Last, First, Middle Initial) <b>C. PNC Bank NA</b>		Date of Disbursement MM / DD / YYYY 11 / 30 / 2021	
Mailing Address 8800 Tincum Blvd.		FEC Identification Number C [ ] <b>Transaction ID : SB21B.11895</b> Amount of Each Disbursement this Period [ ] 206.37	
City Philadelphia	State PA	Zip Code 19153	Category/ Type [ ]
Purpose of Disbursement Credit Card Processing		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:	<input type="checkbox"/> Memo Item		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[ ] 940.71
<b>TOTAL</b> 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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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

**A. PNC Bank NA**

Full Name (Last, First, Middle Initial)

Mailing Address 8800 Tinicum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement Credit Card Processing

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 12 / 31 / 2021

FEC Identification Number: C

Transaction ID : SB21B.11900

Amount of Each Disbursement this Period: 187.94

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:

Date of Disbursement:

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:

Date of Disbursement:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	187.94
<b>TOTAL</b> This Period (last page this line number only).....▶	3067.38

**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) <b>A. AMODEI FOR NEVADA</b>		Date of Disbursement MM / DD / YYYY 07 / 27 / 2021
Mailing Address 503 N DIVISION ST		FEC Identification Number C00496760 <b>Transaction ID : SB23.11863</b> Amount of Each Disbursement this Period 1000.00
City CARSON CITY	State NV	Zip Code 89703
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name <b>AMODEI FOR NEVADA</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>B. ANGIE CRAIG FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 12 / 01 / 2021
Mailing Address P.O. BOX 22116		FEC Identification Number C00575209 <b>Transaction ID : SB23.11880</b> Amount of Each Disbursement this Period 1000.00
City EAGAN	State MN	Zip Code 55122
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name <b>ANGIE CRAIG FOR CONGRESS</b>		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) <b>C. ANN WAGNER FOR CONGRESS</b>		Date of Disbursement MM / DD / YYYY 07 / 19 / 2021
Mailing Address PO BOX 50		FEC Identification Number C00495846 <b>Transaction ID : SB23.11857</b> Amount of Each Disbursement this Period 1000.00
City BALLWIN	State MO	Zip Code 63022
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name <b>ANN WAGNER FOR CONGRESS</b>		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2022 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: MO	District: 02	

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

3000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:  
(check only one)

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

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

**A. CHRISSY HOULAHAN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
07 / 27 / 2021

Mailing Address PO BOX 222

City: DEVON State: PA Zip Code: 19333

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: **CHRISSY HOULAHAN FOR CONGRESS** Category/Type: [ ]

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

State: District:

FEC Identification Number: **C00637371**  
Transaction ID : **SB23.11904**  
Amount of Each Disbursement this Period: 2500.00

Memo Item

**B. COHEN FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
12 / 15 / 2021

Mailing Address 349 KENILWORTH PLACE

City: MEMPHIS State: TN Zip Code: 38112

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: **COHEN FOR CONGRESS** Category/Type: [ ]

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

State: TN District: 09

FEC Identification Number: **C00422980**  
Transaction ID : **SB23.11887**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**C. DAN NEWHOUSE FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Date of Disbursement: MM / DD / YYYY  
12 / 09 / 2021

Mailing Address PO BOX 10949

City: YAKIMA State: WA Zip Code: 98909

Purpose of Disbursement: Contribution to Candidate Committee

Candidate Name: **DAN NEWHOUSE FOR CONGRESS** Category/Type: [ ]

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

State: District:

FEC Identification Number: **C00559393**  
Transaction ID : **SB23.11884**  
Amount of Each Disbursement this Period: 1000.00

Memo Item

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

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

4500.00

**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. 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  
**FRIENDS OF MAZIE HIRONO**

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

State: HI District: 00

Date of Disbursement: 12 / 01 / 2021

FEC Identification Number: C00420760  
Transaction ID : SB23.11881  
Amount of Each Disbursement this Period: 1000.00

Memo Item

**B. FRIENDS OF SCHUMER**

Full Name (Last, First, Middle Initial)  
Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement  
Contribution to Candidate Committee

Candidate Name  
**FRIENDS OF SCHUMER**

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

State: NY District: 00

Date of Disbursement: 10 / 04 / 2021

FEC Identification Number: C00346312  
Transaction ID : SB23.11871  
Amount of Each Disbursement this Period: 4000.00

Memo Item

**C. FRIENDS OF SCHUMER**

Full Name (Last, First, Middle Initial)  
Mailing Address 192 LEXINGTON AVENUE SUITE 1001

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement  
Contribution to Candidate Committee

Candidate Name  
**FRIENDS OF SCHUMER**

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

State: NY District: 00

Date of Disbursement: 10 / 04 / 2021

FEC Identification Number: C00346312  
Transaction ID : SB23.11872  
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)..... ▶

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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<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 TODD YOUNG, INC.**

Date of Disbursement

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

Mailing Address PO BOX 3743

FEC Identification Number

**C** C00459255

**Transaction ID : SB23.11875**

Amount of Each Disbursement this Period

1500.00

Memo Item

City  
CARMEL

State  
IN

Zip Code  
46082

Purpose of Disbursement  
Contribution to Candidate Committee

Category/Type

Candidate Name

**FRIENDS OF TODD YOUNG, INC.**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. HERN FOR CONGRESS**

Date of Disbursement

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

Mailing Address 9521-B RIVERSIDE PKWY  
#350

FEC Identification Number

**C** C00636092

**Transaction ID : SB23.11889**

Amount of Each Disbursement this Period

1500.00

Memo Item

City  
TULSA

State  
OK

Zip Code  
74137

Purpose of Disbursement  
Contribution to Candidate Committee

Category/Type

Candidate Name

**HERN FOR CONGRESS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. LISA MURKOWSKI FOR US SENATE**

Date of Disbursement

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

Mailing Address PO BOX 100847

FEC Identification Number

**C** C00384529

**Transaction ID : SB23.11867**

Amount of Each Disbursement this Period

1000.00

Memo Item

City  
ANCHORAGE

State  
AK

Zip Code  
99510

Purpose of Disbursement  
Contribution to Candidate Committee

Category/Type

Candidate Name

**LISA MURKOWSKI FOR US SENATE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

State: AK District: 00

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

4000.00

**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. MICHELLE STEEL FOR CONGRESS**

Mailing Address 9070 IRVINE CENTER DRIVE  
SUITE 150

City IRVINE State CA Zip Code 92618

Purpose of Disbursement  
Contribution to Candidate Committee

Candidate Name  
**MICHELLE STEEL FOR CONGRESS**

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

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 10 / 2021

FEC Identification Number

**C** C00704981

**Transaction ID : SB23.11905**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. SALAZAR FOR CONGRESS**

Mailing Address 3725 WEST FLAGLER STREET  
#281

City MIAMI State FL Zip Code 33134

Purpose of Disbursement  
Contribution to Committee Candidate

Candidate Name  
**SALAZAR FOR CONGRESS**

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2021

FEC Identification Number

**C** C00714261

**Transaction ID : SB23.11860**

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. SMART SOLUTIONS PAC**

Mailing Address 611 PENNSYLVANIA AVE SE  
UNIT 143

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
Contribution to Candidate Committee

Candidate Name  
**SMART SOLUTIONS PAC**

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

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 27 / 2021

FEC Identification Number

**C** C00654475

**Transaction ID : SB23.11866**

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)..... ▶

7000.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**

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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. 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  
Contribution to Candidate Committee

Candidate Name  
**TITUS FOR CONGRESS**

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

Disbursement For: 2022  
 Primary  General  
 Other (specify) ▼

Date of Disbursement  
MM / DD / YYYY  
12 / 09 / 2021

FEC Identification Number  
**C** C00499467  
**Transaction ID : SB23.11882**  
Amount of Each Disbursement this Period  
1000.00

Memo Item

**B. TRUE NORTH PAC**

Full Name (Last, First, Middle Initial)  
Mailing Address 901 N WASHINGTON ST, SUITE 700

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
Contribution to Candidate Committee

Candidate Name  
**TRUE NORTH PAC**

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2022  
 Primary  General  
 Other (specify)

Date of Disbursement  
MM / DD / YYYY  
10 / 25 / 2021

FEC Identification Number  
**C** C00571000  
**Transaction ID : SB23.11878**  
Amount of Each Disbursement this Period  
1500.00

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

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	31000.00