

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee  
(Summary Page)

STATE OF  
FEDERAL ELECTION  
COMMISSION - MAIL ROOM

1. NAME OF COMMITTEE (in full) <b>American Society of Travel Agents PAC</b>	2. FEC IDENTIFICATION NUMBER <b>C00114108</b>
ADDRESS (number and street) <input type="checkbox"/> Check if different than previously reported <b>1101 King Street</b>	<b>JAN 21 1 03 PM '99</b>
CITY, STATE and ZIP CODE <b>Alexandria, VA 22314</b>	3. <input checked="" type="checkbox"/> This committee has qualified as a multicandidate candidate. (See FEC FORM 1M)

## 4. TYPE OF REPORT

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

Monthly Report Due On:  
 February 20  June 20  October 20  
 March 20  July 20  November 20  
 April 20  August 20  December 20  
 May 20  September 20  January 31

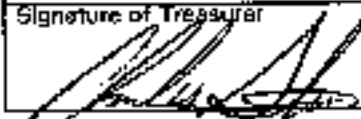
Twelfth day report preceding \_\_\_\_\_ (Type of Election) election on \_\_\_\_\_ in the State of \_\_\_\_\_

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

(b) Is this Report an Amendment?  YES  NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period <u>11/24/98</u> through <u>12/31/98</u>		
6. (a) Cash on Hand January 1, 19 <u>98</u>		\$ 34,216.38
(b) Cash on Hand at Beginning of Reporting Period	\$ 41,313.07	
(c) Total Receipts (from Line 19)	\$ 669.95	\$ 42,895.57
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	\$ 41,983.02	\$ 77,111.95
7. Total Disbursements (from Line 20)	\$ -1,748.08	\$ 33,380.85
8. Cash on Hand at Close of Reporting Period (Subtract Line 7 from Line 6(d))	\$ 43,731.10	\$ 43,731.10
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	For further information: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-219-3420
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	\$ 0.00	
I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.		

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

Signature of Treasurer  Date **1-22-99**

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

# DETAILED SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

PAGE 2, FEC FORM 3X

Revised (1/1/91)

NAME OF COMMITTEE	REPORT COVERING PERIOD	
American Society of Travel Agents PAC	FROM: 11/24/98	TO: 12/31/98
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (Use Schedule A).....	0.00	6,150.00
ii. Unitemized.....	550.00	36,005.00
iii. Total..... (add i and ii) >	550.00	42,155.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (such as PACs).....	0.00	0.00
d. Total Contributions..... (add all, b and c) >	550.00	42,155.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received.....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees...	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	119.95	740.57
18. Transfers from Nonfederal Account for Joint Activity.....	0.00	0.00
19. Total Receipts..... (add 11d, 12, 13, 14, 15, 16, 17, and 18) >	669.95	42,895.57
20. Total Federal Receipts..... (subtract line 18 from line 19) >	669.95	42,895.57
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share.....	0.00	0.00
ii. Non-Federal Share.....	151.92	442.01
b. Other Federal Operating Expenditures.....	0.00	213.84
c. Total Operating Expenditures..... (Add a, ii, and b) >	151.92	655.85
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees...	-1,900.00	30,025.00
24. Independent Expenditures (use Schedule E).....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (! U.S.C.441a(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. Individual/Persons Other Than Political Committees.....	0.00	0.00
b. Political Party Committees.....	0.00	0.00
c. Other Political Committees (Such As PACs).....	0.00	0.00
d. Total Contribution Refunds..... (Add a, b, and c) >	0.00	0.00
29. Other Disbursements.....	0.00	2,700.00
30. Total Disbursements..... (Add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) >	-1,748.08	33,380.85
31. Total Federal Disbursements..... (Subtract line 21 aii from line 30) >	-1,900.00	32,938.84
III. Net Contributions/Operating Expenditures		
32. Total Contributions (Other than loans)(from line 11 d).....	550.00	42,155.00
33. Total Contribution Refunds (from line 28d).....	0.00	0.00
34. Net Contributions (Other than loans)(subtract line 33 from 32).....	550.00	42,155.00
35. Total Federal Operating Expenditures..... (add 21 ai and 21 b) >	0.00	213.84
36. Offsets to Operating Expenditures (from line 15).....	0.00	0.00
37. Net Operating Expenditures..... (subtract line 36 from 35) >	0.00	213.84

**SCHEDULE A**

**ITEMIZED RECEIPTS**

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 or any political committee to solicit contributions from such committee.

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

A. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>		Name of Employer  Occupation	Date (Month day, Year) <b>11/30/98</b>	Amount of Each Receipt this Period  <b>54.33</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ <b>674.95</b>		
B. Full Name, Mailing Address and Zip Code <b>Merrill Lynch Ready Assets</b> <b>P. O. Box 11063</b> <b>Church Station, NY 10249</b>		Name of Employer  Occupation	Date (Month day, Year) <b>12/31/98</b>	Amount of Each Receipt this Period  <b>65.62</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$ <b>740.57</b>		
C. Full Name, Mailing Address and Zip Code		Name of Employer  Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
D. Full Name, Mailing Address and Zip Code		Name of Employer  Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
E. Full Name, Mailing Address and Zip Code		Name of Employer  Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
F. Full Name, Mailing Address and Zip Code		Name of Employer  Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
G. Full Name, Mailing Address and Zip Code		Name of Employer  Occupation	Date (Month day, Year)	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)		Aggregate Year-to-date > \$		
SUB TOTAL of Receipts This Page (Optional).....>				<b>119.95</b>
TOTAL this Period (Last page this line number only).....>				<b>119.95</b>

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

Use separate schedules for each category of the Detailed Summary Page

PAGE	OF
1	1
FOR LINE NUMBER	
21N	

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

A. Full Name, Mailing Address and Zip Code <b>Riggs National Bank</b> <b>PO Box 96758</b> <b>Washington, DC 20090-6758</b>	Purpose of Disbursement <b>operating expenses</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year) <b>12/31/98</b>	Amount of Each Disb. this Period <b>151.92</b>
B. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
C. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
D. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
E. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
F. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
G. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional).....> **151.92**

TOTAL this Period (Last page this line number only).....> **151.92**

**SCHEDULE B**

**ITEMIZED DISBURSEMENTS**

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

A. Full Name, Mailing Address and Zip Code	Purpose of Disbursement	Date (Month day, Year)	Amount of Each Disb. this Period
<b>Rangel for Congress '96 Committee</b> 850 Seventh Avenue, Ste. 701 New York, NY 10019	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1996</b>	12/15/98	-200.00
<b>Judd Gregg Committee</b> P.O. Box 1812 Concord, NH 03302	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-500.00
<b>Jim Ramstad Volunteer Committee</b> 8100 Penn Avenue South Suite 104 Bloomington, MN 55431-1325	<b>Voided Check</b> Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-300.00
<b>CONGRESSMAN BOB CLEMENT COMMITTEE</b> 7757 Inversham Dr. Suite 235 Falls Church, VA 22042	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-200.00
<b>Friends of Bud Cramer</b> 38 Ivy Street, SE Washington, DC 20003	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-250.00
<b>Friends of Cunningham</b> P.O. Box 40227 San Diego, CA 92164	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-200.00
<b>LaTourrette for Congress</b> P.O. Box 516 Painesville, OH 44077	<b>Voided Check</b> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify) <b>1998</b>	12/15/98	-250.00
H. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period
I. Full Name, Mailing Address and Zip Code	Purpose of Disbursement Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (Specify)	Date (Month day, Year)	Amount of Each Disb. this Period

SUB TOTAL of Disbursements this page (Optional) ..... > **-1,900.00**

TOTAL this Period (Last page this line number only) ..... > **-1,900.00**

Federal Election Commission

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> First Class Mail	POSTMARKED
<input checked="" type="checkbox"/> Registered/Certified Mail	POSTMARKED 1/25/99
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
 A M	 1/27/99
PREPARER	DATE PREPARED