

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

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

2. FEC IDENTIFICATION NUMBER C00114108 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2020 through 03 / 31 / 2020

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

Signature of Treasurer Peck, Eben, , , [Electronically Filed] Date 04 / 14 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

AMERICAN SOCIETY OF TRAVEL ADVISORS, INC. PAC

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		313967.33
(b) Cash on Hand at Beginning of Reporting Period.....	313967.33	
(c) Total Receipts (from Line 19)	36655.63	36655.63
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	350622.96	350622.96
7. Total Disbursements (from Line 31).....	74349.17	74349.17
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	276273.79	276273.79
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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).....	26835.53	26835.53
(ii) Unitemized	9663.96	9663.96
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	36499.49	36499.49
(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)	36499.49	36499.49
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	156.14	156.14
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)).....▶	36655.63	36655.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	36655.63	36655.63

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

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	5849.17	5849.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5849.17	5849.17
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	68500.00	68500.00
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)) ..	74349.17	74349.17
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	74349.17	74349.17

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

III. Net Contributions/ Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	36499.49	36499.49
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	36499.49	36499.49
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	5849.17	5849.17
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5849.17	5849.17

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 20
	<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	

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

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

A. 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: 2020
 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
 02 / 06 / 2020
Transaction ID : SA11AI.6942
 Amount of Each Receipt this Period
 1538.46
 Memo Item

B. Chiarini-Gallagher, 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: 2020
 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
 02 / 03 / 2020
Transaction ID : SA11AI.6924
 Amount of Each Receipt this Period
 256.41
 Memo Item

C. Cochrane, Jennifer, , ,
 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) Co-Founder & COO
 Receipt For: 2020
 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
 03 / 23 / 2020
Transaction ID : SA11AI.6947
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6794.87
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 20
	<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. 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: 2020
 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
 02 / 04 / 2020
Transaction ID : SA11AI.6938
 Amount of Each Receipt this Period
 1025.64
 Memo Item

B. da Rosa, Andrea, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 5414 Oberlin St. 300
 City San Diego State CA Zip Code 92121-4744
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Balboa Travel, Inc. Occupation (for Individual) Strategic Solutions Manager
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 18 / 2020
Transaction ID : SA11AI.6922
 Amount of Each Receipt this Period
 250.00
 Memo Item

C. Duke, Judith, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 458 Radio Springs Road SW
 City Rome State GA Zip Code 30165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Judy Duke Travel Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 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
 03 / 31 / 2020
Transaction ID : SA11AI.6929
 Amount of Each Receipt this Period
 307.69
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1583.33
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 8 OF 20
<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. Enriquez, Helen, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 256 West 38th Street,
11th Floor

City New York State NY Zip Code 10018

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

Name of Employer (for Individual) Ensemble Travel Group Occupation (for Individual) VP Product Development & Technology

Receipt For: 2020
 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
 02 / 04 / 2020

Transaction ID : SA11AI.6939

Amount of Each Receipt this Period
1025.64

Memo Item

B. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4701 O Connor Ct

City Irving State TX Zip Code 75062-3761

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

Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
417.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 09 / 2020

Transaction ID : SA11AI.6930

Amount of Each Receipt this Period
417.00

Memo Item

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

Mailing Address 4701 O Connor Ct

City Irving State TX Zip Code 75062-3761

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

Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
834.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 09 / 2020

Transaction ID : SA11AI.6931

Amount of Each Receipt this Period
417.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	1859.64
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 20
	<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. Friedman, Jackie, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 4701 O Connor Ct
 City Irving State TX Zip Code 75062-3761
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Nexion Occupation (for Individual) Travel Executive
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 1251.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 09 / 2020
Transaction ID : SA11AI.6932
 Amount of Each Receipt this Period
 417.00
 Memo Item

B. Geiser, Elizabeth, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 18663 MacArthur Blvd
 City Irvine State CA Zip Code 92612-1200
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Uniglobe Travel Center Occupation (for Individual) VP
 Receipt For: 2020
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼ 514.93

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 28 / 2020
Transaction ID : SA11AI.6937
 Amount of Each Receipt this Period
 514.93
 Memo Item

C. 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: 2020
 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
 03 / 27 / 2020
Transaction ID : SA11AI.6927
 Amount of Each Receipt this Period
 256.41
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1188.34
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 20
	<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. Godwin, David, Stuart, ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 100 Heritage Center Circle
 City Round Rock State TX Zip Code 78664
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Leisure Travel Alliance Occupation (for Individual) President
 Receipt For: 2020
 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
 02 / 19 / 2020
Transaction ID : SA11AI.6941
 Amount of Each Receipt this Period
 1025.64
 Memo Item

B. Goodenow, Wendy, , ,
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 1245 Young St 203
 City Honolulu State HI Zip Code 96814
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) HNL Travel Associates Occupation (for Individual) President/Owner
 Receipt For: 2020
 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
 02 / 26 / 2020
Transaction ID : SA11AI.6925
 Amount of Each Receipt this Period
 256.41
 Memo Item

C. 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: 2020
 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
 01 / 31 / 2020
Transaction ID : SA11AI.6945
 Amount of Each Receipt this Period
 5000.00
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	6282.05
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 11 OF 20
<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. Jackson, Denise, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 4128 Via Mar De Delfinas

City San Diego	State CA	Zip Code 92130-2670
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Balboa Travel Inc.	Occupation (for Individual) President &CEO
---	---

Receipt For: 2020
 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
02		06		2020

Transaction ID : SA11AI.6946

Amount of Each Receipt this Period
5000.00

Memo Item

B. Kimi, Ken, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 1654 Onipaa Street

City Honolulu	State HI	Zip Code 96819
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) A Touch Above Travel Services	Occupation (for Individual) Travel Advisor
--	---

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2020

Transaction ID : SA11AI.6921

Amount of Each Receipt this Period
250.00

Memo Item

C. Lee, Jenn, , ,
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
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Travel Planners International, Inc.	Occupation (for Individual) VP of Sales and Marketing
--	--

Receipt For: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
2051.28

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		05		2020

Transaction ID : SA11AI.6944

Amount of Each Receipt this Period
2051.28

Memo Item

SUBTOTAL of Receipts This Page (optional).....▶	7301.28
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 12 OF 20
(check only one)

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

Mailing Address 564 Gregory Ave
Ste A1

City Weehawken	State NJ	Zip Code 07068
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FEC ID number of contributing federal political committee. **C**

Name of Employer (for Individual) Wayne's World Traveler	Occupation (for Individual) President
---	--

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
205.12

Date of Receipt
MM / DD / YYYY
03 / 25 / 2020

Transaction ID : SA11AI.6910

Amount of Each Receipt this Period
102.56

Memo Item

B. Lovick, David, , ,
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address 10950 Club West Pkwy

City Blaine	State MN	Zip Code 55449-3673
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FEC ID number of contributing federal political committee. **C**

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

Receipt For: 2020
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.82

Date of Receipt
MM / DD / YYYY
02 / 16 / 2020

Transaction ID : SA11AI.6934

Amount of Each Receipt this Period
512.82

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
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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: 2020
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
255.00

Date of Receipt
MM / DD / YYYY
03 / 23 / 2020

Transaction ID : SA11AI.6845

Amount of Each Receipt this Period
85.00

Memo Item

SUBTOTAL of Receipts This Page (optional).....	700.38
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 13 OF 20
<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'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, Inc/Amex Occupation (for Individual) Travel Advisor
 Receipt For: 2020
 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
 03 / 31 / 2020
Transaction ID : SA11AI.6936
 Amount of Each Receipt this Period
 512.82
 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: 2020
 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
 03 / 19 / 2020
Transaction ID : SA11AI.6872
 Amount of Each Receipt this Period
 100.00
 Memo Item

C. 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: 2020
 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
 03 / 03 / 2020
Transaction ID : SA11AI.6935
 Amount of Each Receipt this Period
 512.82
 Memo Item

SUBTOTAL of Receipts This Page (optional).....	1125.64
TOTAL This Period (last page this line number only).....	26835.53

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Mobile Cause

Mailing Address 27001 Agoura Rd
Ste 350A

City Calabasas Hills State CA Zip Code 91301

Purpose of Disbursement
PAC Operating Software

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 31 / 2020

FEC Identification Number

C
Transaction ID : SB21B.6951
Amount of Each Disbursement this Period
4999.00

Memo Item

Full Name (Last, First, Middle Initial)

B. PNC Bank NA

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Category/
Type

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2020

FEC Identification Number

C
Transaction ID : SB21B.6949
Amount of Each Disbursement this Period
426.16

Memo Item

Full Name (Last, First, Middle Initial)

C. PNC Bank NA

Mailing Address 8800 Tincum Blvd.

City Philadelphia State PA Zip Code 19153

Purpose of Disbursement
Credit Card Processing Fees

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2020

FEC Identification Number

C
Transaction ID : SB21B.6950
Amount of Each Disbursement this Period
237.40

Memo Item

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

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

5662.56
5662.56

**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. BLUMENTHAL FOR CONNECTICUT

Mailing Address 1111 SUMMER ST, STE 301
C/O CACACE TUSCH & SANTAGATA

City STAMFORD State CT Zip Code 06905

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2022 Primary General Other (specify) ▼
State: CT District: 00

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2020

FEC Identification Number

C C00492991

Transaction ID : SB23.6975

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. BYRNE FOR SENATE, INC.

Mailing Address PO BOX 3887

City MONTGOMERY State AL Zip Code 36109

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: AL District: 00

Date of Disbursement

MM / DD / YYYY
02 / 12 / 2020

FEC Identification Number

C C00697417

Transaction ID : SB23.6974

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. CITIZENS TO ELECT RICK LARSEN

Mailing Address PO BOX 326

City EVERETT State WA Zip Code 98206

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼
State: WA District: 02

Date of Disbursement

MM / DD / YYYY
02 / 11 / 2020

FEC Identification Number

C C00345546

Transaction ID : SB23.6965

Amount of Each Disbursement this Period

5000.00

Memo Item

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

15000.00

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. COLLINS FOR SENATOR

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: ME District: 00

Date of Disbursement: 02 / 11 / 2020

FEC Identification Number: C00314575
Transaction ID : SB23.6969
Amount of Each Disbursement this Period: 2500.00

Memo Item

B. COLLINS FOR SENATOR

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1096

City BANGOR State ME Zip Code 04402

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: ME District: 00

Date of Disbursement: 02 / 11 / 2020

FEC Identification Number: C00314575
Transaction ID : SB23.6970
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. DEBBIE LESKO FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 45388

City PHOENIX State AZ Zip Code 85064

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: AZ District: 08

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C00663914
Transaction ID : SB23.6977
Amount of Each Disbursement this Period: 2500.00

Memo Item

SUBTOTAL of Disbursements This Page (optional)..... ▶ 10000.00

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. DEMOCRATS TIME IN NEVADA

Mailing Address PO BOX 50614

City
HENDERSON

State
NV

Zip Code
89016

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: NV District: 01

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	3			1	1		2	0	2	0		

FEC Identification Number

C C00450577

Transaction ID : SB23.6981

Amount of Each Disbursement this Period

1000.00

Memo Item

Full Name (Last, First, Middle Initial)

B. JIMMY PANETTA FOR CONGRESS

Mailing Address PO BOX 103

City
CARMEL VALLEY

State
CA

Zip Code
93924

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify)

State: CA District: 20

Date of Disbursement

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

FEC Identification Number

C C00592154

Transaction ID : SB23.6968

Amount of Each Disbursement this Period

5000.00

Memo Item

Full Name (Last, First, Middle Initial)

C. LOU CORREA FOR CONGRESS

Mailing Address 3230 ARENA BLVD
STE 245-416

City
SACRAMENTO

State
CA

Zip Code
95834

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2020
 Primary General
 Other (specify) ▼

State: CA District: 46

Date of Disbursement

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

FEC Identification Number

C C00578302

Transaction ID : SB23.6978

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)..... ▶

11000.00

**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

Full Name (Last, First, Middle Initial) A. MAINE REPUBLICAN PARTY		Date of Disbursement MM / DD / YYYY 02 / 12 / 2020
Mailing Address 9 HIGGINS STREET		FEC Identification Number C00003111 Transaction ID : SB23.6971 Amount of Each Disbursement this Period 5000.00
City AUGUSTA	State ME	Zip Code 04330
Purpose of Disbursement Contribution to Committee		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) B. NUTMEG PAC		Date of Disbursement MM / DD / YYYY 02 / 11 / 2020
Mailing Address C/O CACACE TUSCH & SANTAGATA 777 SUMMER ST		FEC Identification Number C00492983 Transaction ID : SB23.6967 Amount of Each Disbursement this Period 5000.00
City STAMFORD	State CT	Zip Code 06901
Purpose of Disbursement Contribution to Leadership PAC		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	<input type="checkbox"/> Memo Item
State:	District:	

Full Name (Last, First, Middle Initial) C. ROB WITTMAN FOR CONGRESS		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020
Mailing Address PO BOX 427		FEC Identification Number C00441014 Transaction ID : SB23.6980 Amount of Each Disbursement this Period 5000.00
City ALEXANDRIA	State VA	Zip Code 22313
Purpose of Disbursement Contribution to Candidate Committee		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2020 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="checkbox"/> Memo Item
State: VA	District: 01	

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

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

15000.00

**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. ROSEN FOR NEVADA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 27195

City LAS VEGAS State NV Zip Code 89126

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

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

State: NV District: 03

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C00606939
Transaction ID : SB23.6972
Amount of Each Disbursement this Period: 5000.00

Memo Item

B. ROSEN FOR NEVADA

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 27195

City LAS VEGAS State NV Zip Code 89126

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

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

State: NV District: 03

Date of Disbursement: 02 / 12 / 2020

FEC Identification Number: C00606939
Transaction ID : SB23.6973
Amount of Each Disbursement this Period: 5000.00

Memo Item

C. TREY FOR CONGRESS

Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 421

City JEFFERSONVILLE State IN Zip Code 47130

Purpose of Disbursement
Contribution to Candidate Committee

Candidate Name

Office Sought: House Senate President
Disbursement For: 2020 Primary General Other (specify) ▼

State: IN District: 09

Date of Disbursement: 02 / 11 / 2020

FEC Identification Number: C00590463
Transaction ID : SB23.6966
Amount of Each Disbursement this Period: 5000.00

Memo Item

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

15000.00

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. VALUE IN ELECTING WOMEN POLITICAL ACTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		27		2020

Mailing Address 1201 PENNSYLVANIA AVENUE
SUITE 800

City WASHINGTON State DC Zip Code 20004

Purpose of Disbursement
Contribution to Committee

FEC Identification Number

C C00327189

Transaction ID : SB23.6979

Amount of Each Disbursement this Period

2500.00

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For: 2020
 Primary General
 Other (specify) ▼

Memo Item

Full Name (Last, First, Middle Initial)

B.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Memo Item

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

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

Mailing Address

City State Zip Code

Purpose of Disbursement

FEC Identification Number

C

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Memo Item

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

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

2500.00

68500.00