

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

ADDRESS (number and street) 100 INDIANA AVE., N. W.

Check if different than previously reported. (ACC) WASHINGTON DC 20001

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00023580

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |   |                                      |                                       |  |
|---|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2)            | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input checked="" type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4)            | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 02 01 2009 through 02 28 2009

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 Mr. NORMAN C LE FROIS

Signature of Treasurer Electronically Filed by Mr. NORMAN C LE FROIS Date 03 18 2009

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

Office Use Only							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTI-  
ON FUND)

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		3345930.59
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	3513601.83									
(c) Total Receipts (from Line 19) .....	182742.99	363386.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3696344.82	3709317.43								
7. Total Disbursements (from Line 31) .....	98815.79	111788.40								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	3597529.03	3597529.03								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> 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

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTI-  
ON FUND)

Report Covering the Period: From: 

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	0	9

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	1680.00	3725.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	181062.99	359661.84
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	182742.99	363386.84
(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) .....	182742.99	363386.84
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.) .....	0.00	0.00
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 Transfer (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)) .....	182742.99	363386.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	182742.99	363386.84

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared 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.....	3685.79	6658.40
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3685.79	6658.40
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	95000.00	105000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 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) Individuals/Persons Other Than Political Committees .....	130.00	130.00
(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)) .....	130.00	130.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared 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))..	98815.79	111788.40
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	98815.79	111788.40

**DETAILED SUMMARY PAGE**  
of Disbursements

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 .....	182742.99	363386.84
34. Total Contribution Refunds (from Line 28(d)) .....	130.00	130.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	182612.99	363256.84
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3685.79	6658.40
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3685.79	6658.40

**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 / 14
	<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)  
**COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)**

<b>A.</b>	Full Name (Last, First, Middle Initial) E JOHN BEAUMONT		Date of Receipt
	Mailing Address PO BOX 193614		<input type="text" value="02"/> / <input type="text" value="19"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	SAN FRANCISCO	CA	94119-3614
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer USPS		Occupation LETTER CARRIER	Transaction ID: SA11AI.42911
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>	Amount of Each Receipt this Period <input type="text" value="30.00"/>
			COLCPE DONATION

<b>B.</b>	Full Name (Last, First, Middle Initial) L DANIEL FLORKOWSKI		Date of Receipt
	Mailing Address 3595 FLORETTA ST		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	CLARKSTON	MI	48346-4017
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer USPS		Occupation LETTER CARRIER	Transaction ID: SA11AI.42909
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="205.00"/>	Amount of Each Receipt this Period <input type="text" value="205.00"/>
			COLCPE DONATION

<b>C.</b>	Full Name (Last, First, Middle Initial) A KENNETH FREIERMUTH		Date of Receipt
	Mailing Address 3821 23RD AVE S		<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	MINNEAPOLIS	MN	55407-3011
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer USPS		Occupation LETTER CARRIER	Transaction ID: SA11AI.42904
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="520.00"/>	Amount of Each Receipt this Period <input type="text" value="10.00"/>
			COLCPE DONATION

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="245.00"/>
<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 7 / 14
	<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)  
**COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)**

<b>A.</b>	Full Name (Last, First, Middle Initial) A RICHARD HOGAN	Date of Receipt MM / DD / YYYY 02 / 06 / 2009
	Mailing Address 24 W CHELSEA CIR	<b>Transaction ID:</b> SA11AI.42907
	City State Zip Code LACEYS SPRIN AL 35754-4121	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	COLCPE DONATION
	Name of Employer Occupation USPS LETTER CARRIER	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) RALPH KOTOFF	Date of Receipt MM / DD / YYYY 02 / 12 / 2009
	Mailing Address PO BOX 328	<b>Transaction ID:</b> SA11AI.42888
	City State Zip Code ROYAL OAK MI 48068-0328	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. <b>C</b>	COLCPE DONATION
	Name of Employer Occupation USPS LETTER CARRIER	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) A JAMES LUMM	Date of Receipt MM / DD / YYYY 02 / 12 / 2009
	Mailing Address 25901 216TH PL SE	<b>Transaction ID:</b> SA11AI.42910
	City State Zip Code MAPLE VALLEY WA 98038	Amount of Each Receipt this Period 220.00
	FEC ID number of contributing federal political committee. <b>C</b>	COLCPE DONATION
	Name of Employer Occupation USPS LETTER CARRIER	
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>670.00</b>
<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 / 14
	<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)  
**COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)**

<b>A.</b>	Full Name (Last, First, Middle Initial) P JUDY MITCHELL		Date of Receipt MM / DD / YYYY 02 / 02 / 2009
	Mailing Address 8007 LAUDERDALE RD SW		Transaction ID: SA11AI.42893
	City HUNTSVILLE	State AL	Zip Code 35802
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 255.00
	Name of Employer USPS	Occupation LETTER CARRIER	COLCPE DONATION
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) J GABRIEL PAGLIARO		Date of Receipt MM / DD / YYYY 02 / 03 / 2009
	Mailing Address 126 OAK GLEN RD		Transaction ID: SA11AI.42890
	City PITTSBURGH	State PA	Zip Code 15237-2739
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 250.00
	Name of Employer USPS	Occupation LETTER CARRIER	COLCPE DONATION
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) A JOHN WINSTON		Date of Receipt MM / DD / YYYY 02 / 06 / 2009
	Mailing Address 14003 CAMDEN CIR SE		Transaction ID: SA11AI.42898
	City HUNTSVILLE	State AL	Zip Code 35803-3103
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 260.00
	Name of Employer USPS	Occupation LETTER CARRIER	COLCPE DONATION
Receipt For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 260.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>765.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1680.00</b>

**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"/> 24	<input type="checkbox"/> 25	<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)  
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

<b>A.</b> Full Name (Last, First, Middle Initial) KELLY PRESS Mailing Address 1701 CABIN BRANCH DRIVE City CHEVERLY State MD Zip Code 20785 Purpose of Disbursement Printing of Mailings to members Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.42933 Date of Disbursement 02 / 28 / 2009
	Amount of Each Disbursement this Period 3136.86
<b>B.</b> Full Name (Last, First, Middle Initial) Regions Bank Mailing Address 315 Deaderick Street City Nashville State TN Zip Code 37237 Purpose of Disbursement Bank service charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.42934 Date of Disbursement 02 / 28 / 2009
	Amount of Each Disbursement this Period 548.93

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3685.79</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>3685.79</b>

# 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"/> 24	<input type="checkbox"/> 25	<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)

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A.

Full Name (Last, First, Middle Initial)

Ameripac

Mailing Address PO Box 636

City Annandale State VA Zip Code 22003

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District: Other

Transaction ID: SB23.42917

Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Bridge PAC

Mailing Address 499 South Capital St. SW Suite 412

City Washington State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District: Other

Transaction ID: SB23.42918

Date of Disbursement

02 / 03 / 2009

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

SUSAN M COLLINS

Mailing Address 223 NOWELL ROAD

City BANGOR State ME Zip Code 04401

Purpose of Disbursement

Candidate Name

Category/Type

Office Sought:  House  Senate  President  
 Disbursement For: 2014  Primary  General  Other (specify) ▼

State: ME District: 00

Transaction ID: SB23.42929

Date of Disbursement

02 / 25 / 2009

Amount of Each Disbursement this Period

5000.00

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"/> 24	<input type="checkbox"/> 25	<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)  
COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A.	Full Name (Last, First, Middle Initial) Effective Leadership PAC	Transaction ID: SB23.42922 Date of Disbursement
	Mailing Address 309 Lafayette Ave #13M	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Brooklyn State NY Zip Code 11238	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other

B.	Full Name (Last, First, Middle Initial) New Millennium PAC	Transaction ID: SB23.42923 Date of Disbursement
	Mailing Address P.O. Box 632	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City Union City State NJ Zip Code 07087	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other

C.	Full Name (Last, First, Middle Initial) PAC TO THE FUTURE	Transaction ID: SB23.42924 Date of Disbursement
	Mailing Address PMB 3230 268 Bush Street	<input type="text" value="02"/> / <input type="text" value="03"/> / <input type="text" value="2009"/>
	City San Francisco State CA Zip Code 94104	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="15000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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"/> 24	<input type="checkbox"/> 25	<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)

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

<b>A.</b> Full Name (Last, First, Middle Initial) Prairie PAC <hr/> Mailing Address PO Box 2002 <hr/> City Springfield State IL Zip Code 62705 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB23.42925 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Other
<b>B.</b> Full Name (Last, First, Middle Initial) Searchlight Leadership Pac <hr/> Mailing Address 422 C Street, NE Lower Level <hr/> City Washington State DC Zip Code 20002 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB23.42926 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Other
<b>C.</b> Full Name (Last, First, Middle Initial) JOSE E SERRANO <hr/> Mailing Address 910 GRAND CONCOURSE <hr/> City BRONX State NY Zip Code 10451 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 16 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB23.42927 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Other

**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)

PAGE 14 / 14

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<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)

COMMITTEE ON LETTER CARRIERS POLITICAL EDUCATION (LETTER CARRIERS POLITICAL ACTION FUND)

A.

Full Name (Last, First, Middle Initial)

VICTORY NOW

Mailing Address 10605 Concord St.  
Suite 202

City Kensington State MD Zip Code 20895

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

Other

Category/  
Type

Transaction ID: SB23.42928

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2009

Amount of Each Disbursement this Period

5000.00

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

5000.00

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

95000.00