

# 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  
The Society of the Plastics Industry, Inc. Political Action Committee

ADDRESS (number and street) 1667 K Street, NW  
Suite 1000  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00309716  
**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:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on 11 02 2010 in the State of DC

5. Covering Period 10 01 2010 through 11 22 2010

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. Jonathan Kurrle

Signature of Treasurer Electronically Filed by Mr. Jonathan Kurrle Date 12 10 2010

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**

Write or Type Committee Name  
The Society of the Plastics Industry, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		18950.47
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	21984.24									
(c) Total Receipts (from Line 19) .....	1884.00	14036.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	23868.24	32986.47								
7. Total Disbursements (from Line 31) .....	2225.01	11343.24								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	21643.23	21643.23								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

The Society of the Plastics Industry, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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) .....	1700.00	12540.00
(ii) Unitemized .....	184.00	1496.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	1884.00	14036.00
(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) .....	1884.00	14036.00
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.) (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)) .....	1884.00	14036.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1884.00	14036.00

## DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	225.01	743.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	225.01	743.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	10500.00
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 .....	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.....	0.00	100.00
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))..	2225.01	11343.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2225.01	11343.24

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 10

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) .....	1884.00	14036.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1884.00	14036.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	225.01	743.24
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	225.01	743.24

**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 / 10
	<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Paul Appelblom	Date of Receipt MM / DD / YYYY 10 / 06 / 2010
	Mailing Address 725 Zwissig Way	<b>Transaction ID:</b> SA11AI.4578
	City State Zip Code Union City CA 94587	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Jatco Incorporated President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell	Date of Receipt MM / DD / YYYY 10 / 08 / 2010
	Mailing Address 420 Lexington Ave. Suite 2525	<b>Transaction ID:</b> SA11AI.4579
	City State Zip Code New York NY 10170	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Kureha America Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell	Date of Receipt MM / DD / YYYY 11 / 08 / 2010
	Mailing Address 420 Lexington Ave. Suite 2525	<b>Transaction ID:</b> SA11AI.4599
	City State Zip Code New York NY 10170	Amount of Each Receipt this Period 50.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Kureha America Inc. President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	350.00
<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: PAGE 7 / 10  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Gustafson

Mailing Address 1260 Kingsland Dr.

City State Zip Code  
Batavia IL 60510

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

Name of Employer: Innovative Plastech, Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 25 / 2010  
Transaction ID: SA11AI.4596  
Amount of Each Receipt this Period: 500.00  
Contribution

**B.** Full Name (Last, First, Middle Initial)  
Dr. Robert Janeczko

Mailing Address 2360 Grand Ave

City State Zip Code  
West Des Moines IA 50265-5731

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

Name of Employer: Innovative Injection Tech. Occupation: President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 11 / 15 / 2010  
Transaction ID: SA11AI.4600  
Amount of Each Receipt this Period: 250.00  
Contribution

**C.** Full Name (Last, First, Middle Initial)  
Mr. Gregory Leighton

Mailing Address 12729 Foothill Blvd.

City State Zip Code  
Sylmar CA 91342-5314

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

Name of Employer: C&G/Mercury Plastics, Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 11 / 18 / 2010  
Transaction ID: SA11AI.4604  
Amount of Each Receipt this Period: 500.00  
Contribution

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1250.00

**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 8 / 10	
	(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"/> 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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Ms Maureen Steinwall		Date of Receipt																					
	Mailing Address 1759 116th Ave NW		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>0</td><td></td><td>0</td><td>4</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	4		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	4		2	0	1	0														
	City State Zip Code Coon Rapids MN 55448		<b>Transaction ID:</b> SA11AI.4577																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00																					
Name of Employer Occupation Steinwall, Inc. President																								
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1700.00



**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"/> 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)  
The Society of the Plastics Industry, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) Suntrust Bank	Transaction ID: SB21B.4606 Date of Disbursement																			
	Mailing Address P.O. Box 622227	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	9	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	9	/	2	0	1	0												
	City Orlando State FL Zip Code 32862-2227	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Account Fee Candidate Name	<table border="1"><tr><td>20.32</td></tr></table>	20.32																		
20.32																					
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: SB21B.4592 Date of Disbursement																			
	Mailing Address P.O. Box 6600	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	1	/	2	0	1	0												
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Account Fee Candidate Name	<table border="1"><tr><td>111.18</td></tr></table>	111.18																		
111.18																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) SunTrust Merchant Services	Transaction ID: SB21B.4607 Date of Disbursement																			
	Mailing Address P.O. Box 6600	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	1	/	1	0	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
1	1	/	1	0	/	2	0	1	0												
	City Hagerstown State MD Zip Code 21741	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Account Fee Candidate Name	<table border="1"><tr><td>69.89</td></tr></table>	69.89																		
69.89																					
	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) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>201.39</td></tr></table>	201.39
201.39		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td>201.39</td></tr></table>	201.39
201.39		

**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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Pallone for Congress Mailing Address P.O. Box 3176 City Long Branch State NJ Zip Code 07740 Purpose of Disbursement Candidate Contribution Candidate Name Pallone for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4585 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) STEVE CHABOT FOR CONGRESS Mailing Address 3030 HARRISON AVENUE 3014 Harrison Ave. City CINCINNATI State OH Zip Code 45211 Purpose of Disbursement Candidate Contribution Candidate Name STEVE CHABOT FOR CONGRESS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4589 Date of Disbursement 10 / 22 / 2010
	Amount of Each Disbursement this Period 1000.00

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

2000.00

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

2000.00