

**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

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

ADDRESS (number and street)

8000 EAST JEFFERSON

☐Check if different  
than previously  
reported. (ACC)

DETROIT

MI

48214

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00002840

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 (12G)

Election on

in the  
State of(d) 30-Day  
Post -Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2011

through

06

30

2011

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

DENNIS D. WILLIAMS

Signature of Treasurer

Electronically Filed by DENNIS D. WILLIAMS

Date

07

25

2011

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**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

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Report Covering the Period:

From:

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

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 1 1

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2011</span>   |                         | 3476282.06                        |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 3476282.06              |                                   |
| (c) Total Receipts (from Line 19) .....  | 2429126.53              | 2429126.53                        |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 5905408.59              | 5905408.59                        |
| 7. Total Disbursements (from Line 31) .....  | 890771.77               | 890771.77                         |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 5014636.82              | 5014636.82                        |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Report Covering the Period:

From:

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

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 1 1

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  |                               |                                   |
| (i) Itemized (use Schedule A) .....  | 35497.20                      | 35497.20                          |
| (ii) Unitemized .....  | 2384769.00                    | 2384769.00                        |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) .....   | 2420266.20                    | 2420266.20                        |
| (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) .....     | 2420266.20                    | 2420266.20                        |
| 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) ..... | 291.55                        | 291.55                            |
| 16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....           | 6500.00                       | 6500.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 2068.78                       | 2068.78                           |
| 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)) .....                          | 2429126.53                    | 2429126.53                        |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 2429126.53                    | 2429126.53                        |

| II. DISBURSEMENTS  |           | COLUMN A<br>Total This Period | COLUMN B<br>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.....  | 286308.27 | 286308.27                     |                                   |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤                        | 286308.27 | 286308.27                     |                                   |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00      | 0.00                          |                                   |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 262650.00 | 262650.00                     |                                   |
| 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.....   | 341813.50 | 341813.50                     |                                   |
| 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))..       | 890771.77 | 890771.77                     |                                   |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 890771.77 | 890771.77                     |                                   |

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 2420266.20                    | 2420266.20                        |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 2420266.20                    | 2420266.20                        |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 286308.27                     | 286308.27                         |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 291.55                        | 291.55                            |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 286016.72                     | 286016.72                         |

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

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

FOR LINE NUMBER: PAGE 6 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL ABELL

Mailing Address 3307 BARDSTOWN RD.

City

SPRINGFIELD

State

KY

Zip Code

40069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 4 / 2 0 1 1

Transaction ID: SA11AI.120697

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL AILES

Mailing Address 3809 W CR 1275N

City

MUNCIE

State

IN

Zip Code

47303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.120742

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JERRY AYRES

Mailing Address PO BOX 697

City

SPRING HILL

State

TN

Zip Code

37174-0697

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SATURN

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120730

Amount of Each Receipt this Period

300.00

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

900.00

**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 7 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EDWARD BALUKAS

Mailing Address 207 W MONROE ST

City

EASTON

State

PA

Zip Code

18402-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120891

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

EDWARD BALUKAS

Mailing Address 207 W MONROE ST

City

EASTON

State

PA

Zip Code

18402-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120826

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

EDWARD BALUKAS

Mailing Address 207 W MONROE ST

City

EASTON

State

PA

Zip Code

18402-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.121006

Amount of Each Receipt this Period

25.00

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

350.00

**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 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EDWARD BALUKAS

Mailing Address 207 W MONROE ST

City

EASTON

State

PA

Zip Code

18402-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120827

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

EDWARD BALUKAS

Mailing Address 207 W MONROE ST

City

EASTON

State

PA

Zip Code

18402-1713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120701

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM BARBER

Mailing Address 218 RADER CT

City

OLIN

State

NC

Zip Code

28660

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120822

Amount of Each Receipt this Period

300.00

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

375.00

**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 9 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)

MICHAEL BARNETTE

Mailing Address 338 STERLING LAKE DRIVE

City

OCOEE

State

FL

Zip Code

34761-4015

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121019

Amount of Each Receipt this Period

75.00

B.

Full Name (Last, First, Middle Initial)

LENA BEMBERY

Mailing Address 18501 PARKSIDE

City

DETROIT

State

MI

Zip Code

48221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121048

Amount of Each Receipt this Period

250.00

C.

Full Name (Last, First, Middle Initial)

ROY DON BEVIS

Mailing Address 226 PENNSYLVANIA AVENUE

City

LEBANON

State

TN

Zip Code

37087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120734

Amount of Each Receipt this Period

300.00

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

625.00

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 10 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL BIEBER

Mailing Address 582 PINESPAR DRIVE SW

City

BYRON CENTER

State

MI

Zip Code

49315

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.121069

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

OWEN BIEBER

Mailing Address 901 AMBER RIDGE DR SW

City

BYRON CENTER

State

MI

Zip Code

49315-9796

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.121060

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

RANDALL BLAND

Mailing Address 1721 E 2ND STREET

City

TRENTON

State

MO

Zip Code

64683

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEAR CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120902

Amount of Each Receipt this Period

350.00

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

950.00

**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 11 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY J BOLEY

Mailing Address 492 HIGHWAY 287

City

VILONIA

State

AZ

Zip Code

72173-9641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.120926

Amount of Each Receipt this Period

26.00

**B.**

Full Name (Last, First, Middle Initial)

TIMOTHY J BOLEY

Mailing Address 492 HIGHWAY 287

City

VILONIA

State

AZ

Zip Code

72173-9641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.120702

Amount of Each Receipt this Period

26.00

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY J BOLEY

Mailing Address 492 HIGHWAY 287

City

VILONIA

State

AZ

Zip Code

72173-9641

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.120863

Amount of Each Receipt this Period

26.00

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

78.00

**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 12 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAVID BORTZ

Mailing Address 112 CARRIAGE OAKS DRIVE

City

COLUMBIA

State

SC

Zip Code

29229-9302

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MACK TRUCK

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120871

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN BOWMAN

Mailing Address 1143 S PLYMOUTH CT  
UNIT 20

City

CHICAGO

State

IL

Zip Code

60605-2061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.120653

Amount of Each Receipt this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)

STEPHEN BOYCE

Mailing Address 5024 SCRUGGS STATION

City

JEFFERSON CITY

State

MO

Zip Code

65109

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.120975

Amount of Each Receipt this Period

30.00

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

240.00

**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 13 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM L BREIDENSTEIN

Mailing Address 1810 KENSINGTON ST

City

JANESVILLE

State

WI

Zip Code

53546-5750

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120998

Amount of Each Receipt this Period

56.00

**B.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

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

Transaction ID: SA11AI.120954

Amount of Each Receipt this Period

228.00

**C.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer

JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.121035

Amount of Each Receipt this Period

30.00

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

314.00

**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 14 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120694

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

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

Transaction ID: SA11AI.120773

Amount of Each Receipt this Period

54.00

**C.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120812

Amount of Each Receipt this Period

30.00

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

114.00

**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 15 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

STEVEN W BRENNEMAN

Mailing Address 3315 E. PROSPECT RD.

City

YORK

State

PA

Zip Code

17402-8684

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 3 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120921

Amount of Each Receipt this Period

24.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM J BROWN

Mailing Address P.O. BOX 352

City

RUTHERFORD

State

TN

Zip Code

38369-0352

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 9 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.121045

Amount of Each Receipt this Period

245.00

**C.**

Full Name (Last, First, Middle Initial)

LARRY E BUCKHOLZ

Mailing Address P O BOX 552

City

DEARBORN HTS

State

MI

Zip Code

48127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 9 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.121038

Amount of Each Receipt this Period

210.00

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

479.00

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 16 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DON BURGESS

Mailing Address 50 HARVEST HILL LANE

City

SILEX

State

MO

Zip Code

63377

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120868

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

PHILLIP L BURKS

Mailing Address 5 LOVELY LN

City

GREENBRIER

State

AZ

Zip Code

72058-9554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.120700

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

PHILLIP L BURKS

Mailing Address 5 LOVELY LN

City

GREENBRIER

State

AZ

Zip Code

72058-9554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.120780

Amount of Each Receipt this Period

25.00

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

350.00

**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 17 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SANCHIONI BUTLER

Mailing Address 1207 SUZANNA DRIVE

City

RAYMOND

State

MS

Zip Code

39154

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120843

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

JORGE CABRERA

Mailing Address 5914 FOOTHILL DR

City

LOS ANGELES

State

CA

Zip Code

90068

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CALIFORNIA (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 1 1

Transaction ID: SA11AI.120776

Amount of Each Receipt this Period

105.00

**C.**

Full Name (Last, First, Middle Initial)

ESTELLA CACCAMO

Mailing Address 1036 AVILA TERRAZA

City

FREMONT

State

CA

Zip Code

94538

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW UNITED MOTOR MFG

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120654

Amount of Each Receipt this Period

300.00

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

480.00

**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 18 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RALPH CACCAMO

Mailing Address 2073 SANCTUARY PLACE

City

MANTECA

State

CA

Zip Code

95337

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120699

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

GARY CASTEEL

Mailing Address 1975 NEPTUNE ROAD

City

ASHLAND CITY

State

TN

Zip Code

37015-6173

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120810

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL CAVANAUGH

Mailing Address 26330 JEFFERSON AVENUE

City

ST CLAIR SHORES

State

MI

Zip Code

48081-2429

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120684

Amount of Each Receipt this Period

800.00

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

1175.00

**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 19 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAVID CHADWELL

Mailing Address 4351 POST RAIL LN

City

FRANKLIN

State

OH

Zip Code

45005-4950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLER BREWING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.121017

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID CHADWELL

Mailing Address 4351 POST RAIL LN

City

FRANKLIN

State

OH

Zip Code

45005-4950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLER BREWING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11AI.120976

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID CHADWELL

Mailing Address 4351 POST RAIL LN

City

FRANKLIN

State

OH

Zip Code

45005-4950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLER BREWING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120794

Amount of Each Receipt this Period

50.00

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

150.00

**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 20 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAVID CHADWELL

Mailing Address 4351 POST RAIL LN

City

FRANKLIN

State

OH

Zip Code

45005-4950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MILLER BREWING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120710

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

TIMOTHY CHANCE

Mailing Address 1016 RHETT PL

City

LEBANON

State

TN

Zip Code

37087-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.120917

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY CHANCE

Mailing Address 1016 RHETT PL

City

LEBANON

State

TN

Zip Code

37087-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.120880

Amount of Each Receipt this Period

30.00

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

110.00

**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 21 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY CHANCE

Mailing Address 1016 RHETT PL

City

LEBANON

State

TN

Zip Code

37087-8204

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120807

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

FREDDIE D CHARLES

Mailing Address 300 WATER ST

City

LYONS

State

MI

Zip Code

48851

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120958

Amount of Each Receipt this Period

245.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES R CHILDRESS

Mailing Address 892 HAMILTON RD

City

BROOKSVILLE

State

KY

Zip Code

41004

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.121012

Amount of Each Receipt this Period

350.00

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

625.00

**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 22 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DARRELL COULTER

Mailing Address 3111 RIVERS BEND SOUTH

City

BONNE TERRE

State

MO

Zip Code

63628

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120861

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN COYNE

Mailing Address 3802 STAR ISLAND DRIVE

City

HOLIDAY

State

FL

Zip Code

34691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120823

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

ROBIN L CROUCH

Mailing Address 116 EL PERRO DR

City

SAINT PETERS

State

MO

Zip Code

63376-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120748

Amount of Each Receipt this Period

300.00

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

900.00

**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 23 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ROBIN L CROUCH

Mailing Address 116 EL PERRO DR

City

SAINT PETERS

State

MO

Zip Code

63376-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.121013

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

RAYMOND CURRY

Mailing Address 101 GILLESPIE DRIVE APT #1308

City

FRANKLIN

State

TN

Zip Code

37067

FEC ID number of contributing  
federal political committee.

C

Name of Employer

FREIGHTLINER CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120982

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

RAYMOND S DAVIS JR

Mailing Address 10065 MCKINLEY CT

City

MONTROSE

State

MI

Zip Code

48457-9069

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120783

Amount of Each Receipt this Period

300.00

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

400.00

**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 24 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MAURICE DAVISON

Mailing Address 5331 HOLLY SPRINGS DR E

City

INDIANAPOLIS

State

IN

Zip Code

46254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.120959

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

GORDON E DEANE

Mailing Address 8 S MAIN AVE

City

ALBANY

State

NY

Zip Code

12208-2618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.121009

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

GORDON E DEANE

Mailing Address 8 S MAIN AVE

City

ALBANY

State

NY

Zip Code

12208-2618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

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

Transaction ID: SA11AI.120928

Amount of Each Receipt this Period

270.00

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

820.00

**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 25 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SUSAN DEMARIA

Mailing Address 147 RIVERSIDE DRIVE

City

FLORENCE

State

MA

Zip Code

01062-2721

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.120781

Amount of Each Receipt this Period

135.00

**B.**

Full Name (Last, First, Middle Initial)

PAUL DIETZ

Mailing Address 235 DENTON DRIVE

City

DALLASTOWN

State

PA

Zip Code

17313-1417

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.120911

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

TRACEY DORSEY

Mailing Address PO BOX 380443

City

BIRMINGHAM

State

AL

Zip Code

35238

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120715

Amount of Each Receipt this Period

75.00

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

510.00

**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 26 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RONNIE DUBREE

Mailing Address 4018 CROFTON STREET

City

LAFAYETTE

State

IN

Zip Code

47909

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.120707

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DEREK L DUFF

Mailing Address 1735 WARREN HOLLOW RD

City

NOLENSVILLE

State

TN

Zip Code

37135-9418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.120987

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

DEREK L DUFF

Mailing Address 1735 WARREN HOLLOW RD

City

NOLENSVILLE

State

TN

Zip Code

37135-9418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.120947

Amount of Each Receipt this Period

25.00

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

350.00

**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 27 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DEREK L DUFF

Mailing Address 1735 WARREN HOLLOW RD

City

NOLENSVILLE

State

TN

Zip Code

37135-9418

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120844

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

KAREN J DUKE

Mailing Address 7639 MARBLE VALLEY ROAD

City

SYLACAUGA

State

AL

Zip Code

35151-8200

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PEMCO AVIATION GROUP

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120662

Amount of Each Receipt this Period

100.00

**C.**

Full Name (Last, First, Middle Initial)

HARVEY DURHAM

Mailing Address 1276 FIRST AVENUE

City

LAWRENCEBURG

State

TN

Zip Code

38464

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120747

Amount of Each Receipt this Period

300.00

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

425.00

**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 28 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

WALTER EARLY

Mailing Address 8617 PA HARRY DRIVE

City

CHAMBERSBURG

State

PA

Zip Code

17202

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YORK INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120798

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

CARROLL EASON

Mailing Address 16007 GLENMIRO DRIVE

City

HUNTERSVILLE

State

NC

Zip Code

28078

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FREIGHTLINER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120676

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

HENRY EASTER, JR.

Mailing Address 3743 ALDINO RD

City

ABERDEEN

State

MD

Zip Code

21001-1125

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CYTEC INDUSTRIES

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120642

Amount of Each Receipt this Period

25.00

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

175.00

**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 29 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JERRY EHRMAN

Mailing Address 133 VALLEY VIEW DR

City

BUTLER

State

PA

Zip Code

16002-9113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 0 / 2 0 1 1

Transaction ID: SA11AI.120655

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

FRED FABI

Mailing Address 19450 GULF BLVD #505

City

INDIAN SHORES

State

FL

Zip Code

33785

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120761

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

ANTHONY L FLATT

Mailing Address 4077 SHEPARDVILLE HWY

City

BLOOMINGTON SPRING

State

TN

Zip Code

38545-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120789

Amount of Each Receipt this Period

145.00

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

695.00

**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 30 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ANTHONY L FLATT

Mailing Address 4077 SHEPARDVILLE HWY

City

BLOOMINGTON SPRING

State

TN

Zip Code

38545-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120930

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY L FLATT

Mailing Address 4077 SHEPARDVILLE HWY

City

BLOOMINGTON SPRING

State

TN

Zip Code

38545-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

295.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120931

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

ANTHONY L FLATT

Mailing Address 4077 SHEPARDVILLE HWY

City

BLOOMINGTON SPRING

State

TN

Zip Code

38545-7028

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120790

Amount of Each Receipt this Period

25.00

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

100.00

**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 31 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JAMES FLETCHER

Mailing Address 363 EYTH RD.

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120853

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

JAMES FLETCHER

Mailing Address 363 EYTH RD.

City

BUTLER

State

PA

Zip Code

16002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120775

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

LARRY FLUKE

Mailing Address 59327 WHITE CLOUD CIRCLE

City

SOUTH BEND

State

IN

Zip Code

46614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.120782

Amount of Each Receipt this Period

300.00

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

900.00

**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 32 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

LARRY FLUKE

Mailing Address 59327 WHITE CLOUD CIRCLE

City

SOUTH BEND

State

IN

Zip Code

46614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120960

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

RANDALL FREEMAN

Mailing Address 1122 HILLGATE WAY

City

LANSING

State

MI

Zip Code

48912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.120639

Amount of Each Receipt this Period

315.00

**C.**

Full Name (Last, First, Middle Initial)

RANDALL FREEMAN

Mailing Address 1122 HILLGATE WAY

City

LANSING

State

MI

Zip Code

48912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.120801

Amount of Each Receipt this Period

100.00

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

715.00

**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 33 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RANDALL FREEMAN

Mailing Address 1122 HILLGATE WAY

City

LANSING

State

MI

Zip Code

48912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120989

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

RANDALL FREEMAN

Mailing Address 1122 HILLGATE WAY

City

LANSING

State

MI

Zip Code

48912

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.120906

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

FRED W FRUEH

Mailing Address 6642 SANTA RITA

City

GARDEN GROVE

State

CA

Zip Code

92645

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC.

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120779

Amount of Each Receipt this Period

300.00

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

500.00

**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 34 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

PETER FULLERTON

Mailing Address 563 WILLIAMS AVE

City

BROOKLYN

State

NY

Zip Code

11207-6250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 365

Occupation

LOCAL UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 4 / 2 0 1 1

Transaction ID: SA11AI.120627

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

PETER FULLERTON

Mailing Address 563 WILLIAMS AVE

City

BROOKLYN

State

NY

Zip Code

11207-6250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 365

Occupation

LOCAL UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120898

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

PETER FULLERTON

Mailing Address 563 WILLIAMS AVE

City

BROOKLYN

State

NY

Zip Code

11207-6250

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 365

Occupation

LOCAL UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120977

Amount of Each Receipt this Period

25.00

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

75.00

**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 35 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY GARRETT

Mailing Address 314 RIVER DR

City

MT JULIET

State

TN

Zip Code

37122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISTEON CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.121042

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

TIMOTHY GARRETT

Mailing Address 314 RIVER DR

City

MT JULIET

State

TN

Zip Code

37122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISTEON CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.121043

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY GARRETT

Mailing Address 314 RIVER DR

City

MT JULIET

State

TN

Zip Code

37122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISTEON CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 5 / 2 0 1 1

Transaction ID: SA11AI.120778

Amount of Each Receipt this Period

25.00

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

275.00

**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 36 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

TIMOTHY GARRETT

Mailing Address 314 RIVER DR

City

MT JULIET

State

TN

Zip Code

37122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISTEON CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120885

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD GESSNER

Mailing Address 4888 COUNTY ROAD 247

City

VICKERY

State

OH

Zip Code

43464-9551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORP

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120751

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

THOMAS GIBSON

Mailing Address 1171 LANE AVE S  
APT 1204

City

JACKSONVILLE

State

FL

Zip Code

32205-6292

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOLVO (AB)

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120663

Amount of Each Receipt this Period

30.00

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

355.00

**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 37 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SERGIO GONZALEZ

Mailing Address 7416 W BANTON CIR

City

NEW PALESTINE

State

IN

Zip Code

46163-8861

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120820

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

CHARLES M GRIGNANI

Mailing Address 5900 ORANGE BLOSSOM TRAIL

City

DAVENPORT

State

FL

Zip Code

33896-9540

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120972

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

JANE HAINES

Mailing Address 302 WOODLAKE WYNDE

City

OLDSMAR

State

FL

Zip Code

34677

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120819

Amount of Each Receipt this Period

300.00

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

670.00

**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:  
(check only one)

PAGE 38 / 199

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRENDA M HANSEN

Mailing Address 2601 LAKEWOOD RD

City

WHITEHALL

State

MI

Zip Code

49461-9759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.00

Date of Receipt

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

Transaction ID: SA11AI.120996

Amount of Each Receipt this Period

220.00

**B.**

Full Name (Last, First, Middle Initial)

BRENDA M HANSEN

Mailing Address 2601 LAKEWOOD RD

City

WHITEHALL

State

MI

Zip Code

49461-9759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 9 / 2 0 1 1

Transaction ID: SA11AI.120914

Amount of Each Receipt this Period

12.00

**C.**

Full Name (Last, First, Middle Initial)

BRENDA M HANSEN

Mailing Address 2601 LAKEWOOD RD

City

WHITEHALL

State

MI

Zip Code

49461-9759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.120685

Amount of Each Receipt this Period

6.00

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

238.00

**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 39 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRENDA M HANSEN

Mailing Address 2601 LAKEWOOD RD

City

WHITEHALL

State

MI

Zip Code

49461-9759

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

256.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120686

Amount of Each Receipt this Period

6.00

**B.**

Full Name (Last, First, Middle Initial)

Philip Harding

Mailing Address 7411 Palo Verde Rd

City

Irvine

State

CA

Zip Code

92617

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNIVERSITY OF CALIFORNIA

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120634

Amount of Each Receipt this Period

162.50

**C.**

Full Name (Last, First, Middle Initial)

JOHN HERING

Mailing Address 4608 11TH AVE

City

SACRAMENTO

State

CA

Zip Code

95820

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 4123

Occupation

LOCAL UNION STAFF

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.95

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120978

Amount of Each Receipt this Period

32.30

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

200.80

**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 40 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL A HOLLINGSWORTH

Mailing Address 2418 PATRICK ST

City

LEBANON

State

TN

Zip Code

37087-5207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120811

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL A HOLLINGSWORTH

Mailing Address 2418 PATRICK ST

City

LEBANON

State

TN

Zip Code

37087-5207

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120883

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

KEVIN L HUDDLESTON

Mailing Address 224 SYCAMORE ST

City

LEBANON

State

TN

Zip Code

37087-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120763

Amount of Each Receipt this Period

25.00

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

75.00

**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 41 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KEVIN L HUDDLESTON

Mailing Address 224 SYCAMORE ST

City

LEBANON

State

TN

Zip Code

37087-2818

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120681

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERTA JACKSON

Mailing Address 3296 MYSYLIVIA DR

City

SAGINAW

State

MI

Zip Code

48601-6931

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.121053

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

EVETTE JASPER

Mailing Address 725 E PIKE ST.  
APT. 311

City

SEATTLE

State

WA

Zip Code

98122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WASHINGTON (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120635

Amount of Each Receipt this Period

162.50

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

487.50

**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 42 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DONALD JENKINS

Mailing Address 115 PARK PLACE DRIVE

City

COVINGTON

State

GA

Zip Code

30016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.120942

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

NORAH L JOHNSON

Mailing Address 2505 TAFT AVE SW

City

GRAND RAPIDS

State

MI

Zip Code

49509-2265

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120889

Amount of Each Receipt this Period

210.00

**C.**

Full Name (Last, First, Middle Initial)

GENE KEENUM

Mailing Address 3819 PIPER BAY COVE

City

LAKELAND

State

TN

Zip Code

38002

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120814

Amount of Each Receipt this Period

300.00

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

810.00

**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 43 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ELMER KELLEY

Mailing Address 678 N. SETON AVENUE

City

LECANTO

State

FL

Zip Code

34461

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120733

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM M KENDRICK

Mailing Address 4678 S 200 W

City

KOKOMO

State

IN

Zip Code

46902-9560

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAIMLERCHRYSLER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121001

Amount of Each Receipt this Period

230.00

**C.**

Full Name (Last, First, Middle Initial)

SCOTT J KEPHART

Mailing Address 145 E MADISON ST

City

GREENCASTLE

State

PA

Zip Code

17225-1223

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120979

Amount of Each Receipt this Period

75.00

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

605.00

**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 44 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL KLEPPER

Mailing Address 2773 E COTTONWOOD TRL

City

MORRISTOWN

State

IN

Zip Code

46161-9621

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

298.90

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 1

Transaction ID: SA11AI.120886

Amount of Each Receipt this Period

298.90

**B.**

Full Name (Last, First, Middle Initial)

RICK KLINGENBERG

Mailing Address 11605 LIV 224

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEAR CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120792

Amount of Each Receipt this Period

350.00

**C.**

Full Name (Last, First, Middle Initial)

DENNIS KUHN

Mailing Address 4008 67TH AVE

City

PINELLAS PARK

State

FL

Zip Code

33781-6107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RAYTHEON COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120952

Amount of Each Receipt this Period

30.50

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

679.40

**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 45 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DENNIS KUHN

Mailing Address 4008 67TH AVE

City

PINELLAS PARK

State

FL

Zip Code

33781-6107

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RAYTHEON COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120647

Amount of Each Receipt this Period

30.50

**B.**

Full Name (Last, First, Middle Initial)

MARK KUNDRICK

Mailing Address 2060 DUNWOODIE ST

City

ORTONVILLE

State

MI

Zip Code

48462-8556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 9 / 2 0 1 1

Transaction ID: SA11AI.120664

Amount of Each Receipt this Period

420.00

**C.**

Full Name (Last, First, Middle Initial)

HANK LACAYO

Mailing Address 3403 BEAR CREEK DR

City

NEWBURY PARK

State

CA

Zip Code

91320

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.121004

Amount of Each Receipt this Period

300.00

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

750.50

**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 46 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

G LAMBERT

Mailing Address 2423 BLUE HARBOR DR.

City

FORT WAYNE

State

IN

Zip Code

46804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.120894

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

G LAMBERT

Mailing Address 2423 BLUE HARBOR DR.

City

FORT WAYNE

State

IN

Zip Code

46804

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

306.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.120895

Amount of Each Receipt this Period

2.00

**C.**

Full Name (Last, First, Middle Initial)

ELAINE LANTZ

Mailing Address 818 ELSBETH ST

City

DALLAS

State

TX

Zip Code

75208-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120740

Amount of Each Receipt this Period

300.00

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

602.00

**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 47 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ELAINE LANTZ

Mailing Address 818 ELSBETH ST

City

DALLAS

State

TX

Zip Code

75208-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RKOccupation  
CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 5 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120658

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

ELAINE LANTZ

Mailing Address 818 ELSBETH ST

City

DALLAS

State

TX

Zip Code

75208-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RKOccupation  
CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

560.00

Date of Receipt

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

Transaction ID: SA11AI.120824

Amount of Each Receipt this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)

BONNIE J LAURIA

Mailing Address 3913 MAES RD

City

WEST BRANCH

State

MI

Zip Code

48661-9691

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 9 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.121058

Amount of Each Receipt this Period

300.00

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

560.00

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 48 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

R LEONE

Mailing Address 24457 HURON RIVER DR

City

ROCKWOOD

State

MI

Zip Code

48173-9766

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121057

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

WILFRED LITTLETON

Mailing Address 8903 PLAINVIEW

City

DETROIT

State

MI

Zip Code

48228

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

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

Transaction ID: SA11AI.120961

Amount of Each Receipt this Period

220.00

**C.**

Full Name (Last, First, Middle Initial)

ALVIN D LLOYD SR

Mailing Address 7712 TRAPPE RD

City

BALTIMORE

State

MD

Zip Code

21224-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120923

Amount of Each Receipt this Period

300.00

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

820.00

**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 49 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ROXANNA LUCAS

Mailing Address 1926 S BUCKEYE ST

City

KOKOMO

State

IN

Zip Code

46902-2153

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.120968

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL LUNA

Mailing Address 116 MAPLEVIEW DR

City

CHARLOTTE

State

MI

Zip Code

48813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RYDER SYSTEMS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120799

Amount of Each Receipt this Period

185.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL LUNA

Mailing Address 116 MAPLEVIEW DR

City

CHARLOTTE

State

MI

Zip Code

48813

FEC ID number of contributing  
federal political committee.

C

Name of Employer

RYDER SYSTEMS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.120631

Amount of Each Receipt this Period

10.00

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

495.00

**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 50 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL LUNA

Mailing Address 116 MAPLEVIEW DR

City

CHARLOTTE

State

MI

Zip Code

48813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RYDER SYSTEMS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 8 |   | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120870

Amount of Each Receipt this Period

310.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL LUNA

Mailing Address 116 MAPLEVIEW DR

City

CHARLOTTE

State

MI

Zip Code

48813

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RYDER SYSTEMS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

580.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120630

Amount of Each Receipt this Period

10.00

**C.**

Full Name (Last, First, Middle Initial)

ARTHUR LUNA JR

Mailing Address 308 PEARL ST APT 2

City

CHARLOTTE

State

MI

Zip Code

48813-1879

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 0 | 8 |   | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.121062

Amount of Each Receipt this Period

310.00

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

630.00

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 51 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JACK Y MALONE

Mailing Address 868 HAMILTON RD

City

LEBANON

State

TN

Zip Code

37087-6325

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120800

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

PETER MASICH JR

Mailing Address 12459 GENESEE RD

City

EAST CONCORD

State

NY

Zip Code

14055-9727

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

301.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 0 | 5 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120695

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

PETER MASICH JR

Mailing Address 12459 GENESEE RD

City

EAST CONCORD

State

NY

Zip Code

14055-9727

FEC ID number of contributing  
federal political committee.**C**Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 1 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120852

Amount of Each Receipt this Period

4.00

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

329.00

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 52 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

PETER MASICH JR

Mailing Address 12459 GENESEE RD

City

EAST CONCORD

State

NY

Zip Code

14055-9727

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

307.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.121037

Amount of Each Receipt this Period

2.00

**B.**

Full Name (Last, First, Middle Initial)

DYLAN H MAYER

Mailing Address PO BOX 353350

City

SEATTLE

State

WA

Zip Code

98195-3350

FEC ID number of contributing  
federal political committee.

C

Name of Employer

WASHINGTON (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120813

Amount of Each Receipt this Period

162.50

**C.**

Full Name (Last, First, Middle Initial)

RONALD MCDUGALL

Mailing Address 63 GLEASON ST

City

GOUVERNEUR

State

NY

Zip Code

13642-1224

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.121002

Amount of Each Receipt this Period

300.00

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

464.50

**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 53 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RICHARD H MERREN, JR.

Mailing Address 3915 E PONTIAC ST

City

FORT WAYNE

State

IN

Zip Code

46803-3801

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.120821

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

WALTER R MILLS

Mailing Address 24250 JEROME ST

City

OAK PARK

State

MI

Zip Code

48237-1612

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120965

Amount of Each Receipt this Period

220.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES MONCADA

Mailing Address 900 BRAD ST.

City

LANSING

State

MI

Zip Code

48911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CADBURY SCHWEPES PLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

244.73

Date of Receipt

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

Transaction ID: SA11AI.120991

Amount of Each Receipt this Period

70.00

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

590.00

**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 54 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JAMES MONCADA

Mailing Address 900 BRAD ST.

City

LANSING

State

MI

Zip Code

48911

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CADBURY SCHWEPES PLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.73

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120909

Amount of Each Receipt this Period

35.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN C MORRIS

Mailing Address 1116 SOUTHWINDS DR

City

PORT ORANGE

State

FL

Zip Code

32129-7835

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120857

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.00

Date of Receipt

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

Transaction ID: SA11AI.120809

Amount of Each Receipt this Period

228.00

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

563.00

**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 55 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

258.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.120726

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

288.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120918

Amount of Each Receipt this Period

30.00

**C.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

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

Transaction ID: SA11AI.120881

Amount of Each Receipt this Period

54.00

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

114.00

**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 56 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

372.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120648

Amount of Each Receipt this Period

30.00

**B.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.121033

Amount of Each Receipt this Period

24.00

**C.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120689

Amount of Each Receipt this Period

24.00

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

78.00

**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 57 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KEITH E MYERS

Mailing Address 2450 BLACKBERRY RD

City

DOVER

State

PA

Zip Code

17315-3043

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

444.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120849

Amount of Each Receipt this Period

24.00

**B.**

Full Name (Last, First, Middle Initial)

KEITH NEARGARDNER

Mailing Address 7415 MEADOW VIOLET COURT

City

AVON

State

IN

Zip Code

46123

FEC ID number of contributing  
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120855

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

BRIAN NEGOVAN

Mailing Address 19855 JOLGREN DR

City

CLINTON TOWNSHIP

State

MI

Zip Code

48038-2263

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UAW LOCAL 155

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.121071

Amount of Each Receipt this Period

40.00

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

364.00

**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 58 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRIAN NEGOVAN

Mailing Address 19855 JOLGREN DR

City

CLINTON TOWNSHIP

State

MI

Zip Code

48038-2263

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 155

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.121068

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM W OAKLEY

Mailing Address 7417 LIBERTY RD

City

FAIRVIEW

State

TN

Zip Code

37062-8338

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VISTEON CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120832

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN R O HARA

Mailing Address 216 WOODMONT DR

City

CAMILLUS

State

NY

Zip Code

13031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MAGNA INTERNATIONAL INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.120953

Amount of Each Receipt this Period

75.00

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

140.00

**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 59 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KEVIN PACK

Mailing Address 1000 WEST VIKING COURT

City

ABINGDON

State

MD

Zip Code

21009

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120767

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM P PANEBAKER

Mailing Address 345 CLOVER LN

City

HANOVER

State

PA

Zip Code

17331-9252

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHARTER PLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120992

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID PARSONS

Mailing Address 9236 24TH AVE SW

City

SEATTLE

State

WA

Zip Code

98106-2602

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 4191

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120795

Amount of Each Receipt this Period

162.50

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

262.50

**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 60 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

PERRY W PATTON

Mailing Address 411 AMERICAN RD

City

NASHVILLE

State

TN

Zip Code

37209-2993

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11AI.120877

Amount of Each Receipt this Period

150.00

**B.**

Full Name (Last, First, Middle Initial)

PERRY W PATTON

Mailing Address 411 AMERICAN RD

City

NASHVILLE

State

TN

Zip Code

37209-2993

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.120879

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

PERRY W PATTON

Mailing Address 411 AMERICAN RD

City

NASHVILLE

State

TN

Zip Code

37209-2993

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120765

Amount of Each Receipt this Period

75.00

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

300.00

**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 61 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

VANCE PEARSON

Mailing Address 6611 CIELO DRIVE

City

PALMDALE

State

CA

Zip Code

93551

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120731

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERT G PEDERSEN

Mailing Address 11255 BRENTWOOD AVE

City

ZIONSVILLE

State

IN

Zip Code

46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENSKE CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120738

Amount of Each Receipt this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

ROBERT G PEDERSEN

Mailing Address 11255 BRENTWOOD AVE

City

ZIONSVILLE

State

IN

Zip Code

46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENSKE CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120924

Amount of Each Receipt this Period

210.00

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

760.00

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 62 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ROBERT G PEDERSEN

Mailing Address 11255 BRENTWOOD AVE

City

ZIONSVILLE

State

IN

Zip Code

46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENSKE CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

512.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 2 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120925

Amount of Each Receipt this Period

52.50

**B.**

Full Name (Last, First, Middle Initial)

ROBERT G PEDERSEN

Mailing Address 11255 BRENTWOOD AVE

City

ZIONSVILLE

State

IN

Zip Code

46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENSKE CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

565.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120657

Amount of Each Receipt this Period

52.50

**C.**

Full Name (Last, First, Middle Initial)

ROBERT G PEDERSEN

Mailing Address 11255 BRENTWOOD AVE

City

ZIONSVILLE

State

IN

Zip Code

46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PENSKE CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 0 | 7 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120739

Amount of Each Receipt this Period

52.50

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

157.50

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 63 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM R PENDERGRASS

Mailing Address 333 MOORE RD

City

COOKEVILLE

State

TN

Zip Code

38506

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CUMMINS ENGINE CO

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121039

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID PERKINS

Mailing Address 21405 RUBLE ROAD

City

BOONSBORO

State

MO

Zip Code

21713

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOLVO (AB)

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.120644

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

CHARLES A PHANN

Mailing Address 1829 YORK HIGHWAY

City

GAINESBORO

State

TN

Zip Code

38562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BLACKSTONE GROUP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120833

Amount of Each Receipt this Period

25.00

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

625.00

**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 64 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

CHARLES A PHANN

Mailing Address 1829 YORK HIGHWAY

City

GAINESBORO

State

TN

Zip Code

38562

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BLACKSTONE GROUP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 8 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120793

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKE ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 1 | 7 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120815

Amount of Each Receipt this Period

625.00

**C.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKE ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 2 | 9 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120956

Amount of Each Receipt this Period

375.00

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

1025.00

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 65 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKES ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1020.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: SA11AI.120955

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKES ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1145.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 1 1

Transaction ID: SA11AI.120816

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKES ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120957

Amount of Each Receipt this Period

125.00

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

270.00

**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 66 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRUCE PONTIA

Mailing Address 200 CHESWICK DRIVE

City

MARTINSBURG

State

WV

Zip Code

25401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120665

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

BRADLEY POPE

Mailing Address 5250 ALEXANDER ROAD

City

DUBLIN

State

VA

Zip Code

24084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120999

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

PAUL PORT

Mailing Address 4008 13TH ST

City

MENOMINEE

State

MI

Zip Code

49858-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JONES L E COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.121074

Amount of Each Receipt this Period

300.00

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

675.00

**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 67 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

VICTOR QUESADA

Mailing Address 35125 ABEL PLACE

City

FREMONT

State

CA

Zip Code

94536

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.120860

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

SALVADOR QUINTANA

Mailing Address 682 BAKER RD

City

COLUMBIA

State

TN

Zip Code

38401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120964

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM REAM

Mailing Address 3772 MACARTHUR RD

City

MUSKEGON

State

MI

Zip Code

49442-8420

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL DYNAMICS CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.121054

Amount of Each Receipt this Period

320.00

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

1020.00

**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 68 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JAMES ROGERS

Mailing Address 305 N DELAWARE AVENUE

City State Zip Code  
 MARTINSBURG WV 25401

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120846

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

CAROLINE S ROSS

Mailing Address 10587 RIVERSIDE DR

City State Zip Code  
 SAINT LOUIS MI 48880-9406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF MICHIGAN

Occupation  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.121064

Amount of Each Receipt this Period

260.00

**C.**

Full Name (Last, First, Middle Initial)

CAROLINE S ROSS

Mailing Address 10587 RIVERSIDE DR

City State Zip Code  
 SAINT LOUIS MI 48880-9406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
STATE OF MICHIGAN

Occupation  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.121075

Amount of Each Receipt this Period

150.00

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

485.00

**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 69 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRIAN SCHEFKE

Mailing Address 9216 WOODLAWN AVE N

City

SEATTLE

State

WA

Zip Code

98103-3528

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WASHINGTON (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120882

Amount of Each Receipt this Period

162.50

**B.**

Full Name (Last, First, Middle Initial)

NED SCOTT

Mailing Address 25146 CLIFFROSE STREET

City

CORONA AREA

State

CA

Zip Code

92883

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOEING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.120735

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

TODD SCOTT

Mailing Address 520 W 6TH ST

City

WAYNESBORO

State

PA

Zip Code

17268-2108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120995

Amount of Each Receipt this Period

75.00

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

537.50

**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 70 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
TERRY SHARPE

Mailing Address 3 SCHOOL ST  
PO BOX 283

City State Zip Code  
MCLEAN NY 13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORNELL UNIVERSITY

Occupation  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 7 / 2 0 1 1

Transaction ID: SA11AI.120806

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)  
TERRY SHARPE

Mailing Address 3 SCHOOL ST  
PO BOX 283

City State Zip Code  
MCLEAN NY 13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CORNELL UNIVERSITY

Occupation  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 6 / 2 0 1 1

Transaction ID: SA11AI.121029

Amount of Each Receipt this Period

20.00

**C.**

Full Name (Last, First, Middle Initial)  
CHRIS E SIMS

Mailing Address 4005 COLUMBUS AVE

City State Zip Code  
SANDUSKY OH 44870

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120963

Amount of Each Receipt this Period

900.00

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

980.00

**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 71 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ALVIN SMITH

Mailing Address 390 WAGES ROAD

City

AUBURN

State

GA

Zip Code

30011

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.121028

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

MITCHELL SMITH

Mailing Address 800 AMELIA ROAD

City

LOCUST GROVE

State

GA

Zip Code

30248

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120830

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

ROBERT SMITH

Mailing Address 2665 EDEN RD

City

LESLIE

State

MI

Zip Code

49251-9570

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.121067

Amount of Each Receipt this Period

150.00

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

300.00

**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 72 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RUSTY E SMITH

Mailing Address 6972 STATE ROUTE 29

City

MECHANICSBURG

State

OH

Zip Code

43044-9712

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CO-  
RP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

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

Transaction ID: SA11AI.120890

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

GEORGE SOLANDER

Mailing Address PO BOX 597

City

FLAT ROCK

State

OH

Zip Code

44828-0597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BELLEVUE MFG CO

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120743

Amount of Each Receipt this Period

70.00

**C.**

Full Name (Last, First, Middle Initial)

GEORGE SOLANDER

Mailing Address PO BOX 597

City

FLAT ROCK

State

OH

Zip Code

44828-0597

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BELLEVUE MFG CO

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.121007

Amount of Each Receipt this Period

40.00

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

215.00

**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 73 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DANNY SPARKS

Mailing Address 5561 SADDLEBROOK DRIVE

City

DOUGLASVILLE

State

GA

Zip Code

30135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120944

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

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

Transaction ID: SA11AI.120867

Amount of Each Receipt this Period

380.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

430.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 2 6 / 2 0 1 1

Transaction ID: SA11AI.120713

Amount of Each Receipt this Period

50.00

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

505.00

**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 74 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 0 7 / 2 0 1 1

Transaction ID: SA11AI.120941

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

570.00

Date of Receipt

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

Transaction ID: SA11AI.120980

Amount of Each Receipt this Period

90.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

620.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120673

Amount of Each Receipt this Period

50.00

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

190.00

**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 75 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

660.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 3 / 2 0 1 1

Transaction ID: SA11AI.121021

Amount of Each Receipt this Period

40.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120981

Amount of Each Receipt this Period

40.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID L STAUCH

Mailing Address 2665 LEWISBERRY RD

City

YORK

State

PA

Zip Code

17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer

YORK INTERNATIONAL CORPOR-  
ATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

740.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120901

Amount of Each Receipt this Period

40.00

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

120.00

**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 76 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

LARRY STEELE

Mailing Address 272 HERITAGE ROAD

City

CHAMBERSBURG

State

PA

Zip Code

17201

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATIONAL UNION, UAW

Occupation

UNION STAFF

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120915

Amount of Each Receipt this Period

75.00

**B.**

Full Name (Last, First, Middle Initial)

JAMES STEWART

Mailing Address 21733 MT AETNA RD

City

HAGERSTOWN

State

MD

Zip Code

21742

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: SA11AI.120817

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

BRET MSTITHEM

Mailing Address RR 2 BOX 116

City

BEE BRANCH

State

AR

Zip Code

72013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.121046

Amount of Each Receipt this Period

25.00

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

400.00

**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 77 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BRET M STITHEM

Mailing Address RR 2 BOX 116

City

BEE BRANCH

State

AR

Zip Code

72013

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN TRANSPORTATION  
CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 0 / 2 0 1 1

Transaction ID: SA11AI.120661

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

THOMAS E STOKES

Mailing Address 1129 LEWIS RD

City

BURNS

State

TN

Zip Code

37029-5650

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.120651

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

LENDUL TANNEY

Mailing Address 3419 E HUBBARD RD

City

MIDLAND

State

MI

Zip Code

48642-7210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.120825

Amount of Each Receipt this Period

300.00

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

350.00

**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 78 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

GREGORY KEVIN TAYLOR

Mailing Address 1520 EASTLAKE AVE., APT 716

City

SEATTLE

State

WA

Zip Code

98102

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WASHINGTON (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

274.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 6 / 2 0 1 1

Transaction ID: SA11AI.121041

Amount of Each Receipt this Period

274.00

**B.**

Full Name (Last, First, Middle Initial)

ARTHUR THOMAS

Mailing Address 142 HANEY CIRCLE

City

GAINESBORO

State

TN

Zip Code

38562-5546

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CUMMINS INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 8 / 2 0 1 1

Transaction ID: SA11AI.120840

Amount of Each Receipt this Period

75.00

**C.**

Full Name (Last, First, Middle Initial)

CHARLES O THOMAS

Mailing Address 359 COOKEVILLE HWY

City

CARTHAGE

State

TN

Zip Code

37030-1845

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
T R W

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA11AI.120754

Amount of Each Receipt this Period

25.00

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

374.00

**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 79 / 199

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

KIM TOWNSEND

Mailing Address 722 S MONTGOMERY ST

City

HASTINGS

State

MI

Zip Code

49058-2454

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HASTINGS MANUFACTURING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 0 9 / 2 0 1 1

Transaction ID: SA11AI.120854

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

JOSEPH A VEEHOFF

Mailing Address 102 1ST AVENUE

City

HAWTHORNE

State

NJ

Zip Code

07506-2406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.120862

Amount of Each Receipt this Period

135.00

**C.**

Full Name (Last, First, Middle Initial)

ROBERT G WAGNER

Mailing Address 5882 NW 62ND AVE

City

OCALA

State

FL

Zip Code

34482-2613

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11AI.121072

Amount of Each Receipt this Period

300.00

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

735.00

**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 80 / 199

(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 |
|---|------------------------------|------------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|-----------------------------|

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SCOTT WATTS

Mailing Address 2808 PAMELA PLACE

City

MINDEN

State

NV

Zip Code

89423

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 1 | 6 | / | 2 | 0 | 1 | 1 |

Transaction ID: SA11AI.120652

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERT T YEAGER

Mailing Address 1146 SOUTHEAST AVE

City

OAK PARK

State

IL

Zip Code

60304

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEGAL SERVICES FOR NEW YO-

RK

Occupation

CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

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

Transaction ID: SA11AI.121010

Amount of Each Receipt this Period

135.00

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

435.00

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

35497.20

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

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

FOR LINE NUMBER: PAGE 81 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☒ 15 ☐ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MUNDY KATOWITZ MEDIA, INC.

Mailing Address 904 PENNSYLVANIA AVE., SE

City

WASHINGTON

State

DC

Zip Code

20003

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

291.55

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 8 / 2 0 1 1

Transaction ID: SA15.121111

Amount of Each Receipt this Period

291.55

REFUND FROM LAST YEAR ELE-  
CTION CYCLE

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

291.55

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

291.55

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

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

FOR LINE NUMBER: PAGE 82 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

NC-02 JOINT RECOUNT FUND

Mailing Address PO BOX 28001

City

RALEIGH

State

NC

Zip Code

27611

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☐ General

☒ Other (specify) ▼  
Recount

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 2 7 / 2 0 1 1

Transaction ID: SA16.121112

Amount of Each Receipt this Period

2500.00

REFUND OF EXCESS CONTRIBU-  
TION

**B.**

Full Name (Last, First, Middle Initial)

RUSH HOLT FOR CONGRESS

Mailing Address P O BOX 782

City

PENNINGTON

State

NJ

Zip Code

08534

FEC ID number of contributing  
federal political committee.

C

C00313684

Name of Employer

Occupation

Receipt For: 2010

☐ Primary ☒ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

4000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 7 / 2 0 1 1

Transaction ID: SA16.121113

Amount of Each Receipt this Period

4000.00

REFUND OF CONTRIBUTION CK-  
#31479 DTD 10/20/10

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

6500.00

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

6500.00

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

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

FOR LINE NUMBER: PAGE 83 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

278.15

Date of Receipt

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

Transaction ID: SA17.121083

Amount of Each Receipt this Period

278.15

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.25

Date of Receipt

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

Transaction ID: SA17.121088

Amount of Each Receipt this Period

7.10

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.66

Date of Receipt

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

Transaction ID: SA17.121093

Amount of Each Receipt this Period

20.41

INTEREST ON CHECKING

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

305.66

**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 84 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

316.34

Date of Receipt

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

Transaction ID: SA17.121098

Amount of Each Receipt this Period

10.68

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

578.16

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA17.121084

Amount of Each Receipt this Period

261.82

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

584.57

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA17.121089

Amount of Each Receipt this Period

6.41

INTEREST ON CHECKING

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

278.91

**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 85 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

606.59

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA17.121094

Amount of Each Receipt this Period

22.02

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 8 / 2 0 1 1

Transaction ID: SA17.121099

Amount of Each Receipt this Period

10.25

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

921.30

Date of Receipt

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

Transaction ID: SA17.121085

Amount of Each Receipt this Period

304.46

INTEREST ON CHECKING

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

336.73

**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 86 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

928.40

Date of Receipt

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

Transaction ID: SA17.121090

Amount of Each Receipt this Period

7.10

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

957.76

Date of Receipt

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

Transaction ID: SA17.121095

Amount of Each Receipt this Period

29.36

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

969.77

Date of Receipt

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

Transaction ID: SA17.121100

Amount of Each Receipt this Period

12.01

INTEREST ON CHECKING

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

48.47

**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 87 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1256.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA17.121086

Amount of Each Receipt this Period

286.29

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1262.70

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA17.121091

Amount of Each Receipt this Period

6.64

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1293.27

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA17.121096

Amount of Each Receipt this Period

30.57

INTEREST ON CHECKING

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

323.50

**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 88 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1304.82

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 1 1

Transaction ID: SA17.121101

Amount of Each Receipt this Period

11.55

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1634.20

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA17.121087

Amount of Each Receipt this Period

329.38

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1641.53

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA17.121092

Amount of Each Receipt this Period

7.33

INTEREST ON CHECKING

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

348.26

**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 89 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1686.14

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA17.121097

Amount of Each Receipt this Period

44.61

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1701.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 1 1

Transaction ID: SA17.121102

Amount of Each Receipt this Period

15.34

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2005.06

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA17.121127

Amount of Each Receipt this Period

303.58

INTEREST ON CHECKING

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

363.53

**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 90 / 199

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2011.93

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA17.121128

Amount of Each Receipt this Period

6.87

INTEREST ON CHECKING

**B.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2054.31

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA17.121129

Amount of Each Receipt this Period

42.38

INTEREST ON CHECKING

**C.**

Full Name (Last, First, Middle Initial)

JPMORGAN CHASE

Mailing Address 611 WOODWARD

City

DETROIT

State

MI

Zip Code

48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2068.78

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 1 1

Transaction ID: SA17.121130

Amount of Each Receipt this Period

14.47

INTEREST ON CHECKING

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

63.72

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

2068.78

# **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 91 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

AL SERRA AUTO PLAZA

Mailing Address G-6201 SOUTH SAGINAW STREET

City GRAND BLANC State MI Zip Code 48439

Purpose of Disbursement  
REPAIRS TO 2010 CHEVY CAMARO

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120272

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3712.75

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN IMAGES BY HILLSTAR

Mailing Address 25 IMSON STREET

City BUFFALO State NY Zip Code 14210

Purpose of Disbursement  
V-CAP DIAMOND CLUB

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1196.25

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN IMAGES BY HILLSTAR

Mailing Address 25 IMSON STREET

City BUFFALO State NY Zip Code 14210

Purpose of Disbursement  
V-CAP DIAMOND CLUB

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120427

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2817.78

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

7726.78

**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 92 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
R5 WATCHES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120072

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3176.36

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
REPAIR-CLEAN VCAP WATCHES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120271

Date of Disbursement

/   /

Amount of Each Disbursement this Period

18.00

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
R5 VCAP WATCHES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120463

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2168.61

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

5362.97

**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 93 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

PHILLIP AUSTIN

Mailing Address 5361 BANKSIA COURT

City  
PLAINFIELD

State  
IN

Zip Code  
46168

Purpose of Disbursement  
REGION 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120060

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

ADOLPH BORREGO

Mailing Address 7365 BIRCH RUN RD

City  
BIRCH RUN

State  
MI

Zip Code  
48415-8459

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120262

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

STANLEY BOVEN

Mailing Address 7763 BAILEY RD

City  
BROWN CITY

State  
MI

Zip Code  
48416

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120267

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 94 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ED BOWE

Mailing Address 5820 BAUMHOFF AVE NW

City COMSTOCK PARK State MI Zip Code 49321

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120104

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERT BRONSON

Mailing Address 588 IDLEWOOD CT. SW

City BYRON CENTER State MI Zip Code 49315

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120102

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

DAN BUCHNER

Mailing Address 2181 DUCK LAKE RD

City WHITEHALL State MI Zip Code 49461

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120261

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1400.00

**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 95 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

CAMPBELL CATERING LLC

Mailing Address 2502 N. EAST STREET

City  
LANSING

State  
MI

Zip Code  
48906

Purpose of Disbursement  
CANDIDATE SCREENINGS-FOOD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120473

Date of Disbursement

/   /

Amount of Each Disbursement this Period

621.43

**B.**

Full Name (Last, First, Middle Initial)

CATALIST

Mailing Address 1101 VERMONT AVENUE NW  
#900

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
ISSUE ADVOCACY

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120434

Date of Disbursement

/   /

Amount of Each Disbursement this Period

290.82

**C.**

Full Name (Last, First, Middle Initial)

CLARENCE H. JOHNSON, P.C.

Mailing Address P O BOX 427  
26212 WOODWARD AVENUE

City  
ROYAL OAK

State  
MI

Zip Code  
48068-0427

Purpose of Disbursement  
09 AUDIT, TAX FILINGS, MISC.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120283

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3173.40

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

4085.65

**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 96 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
VCAP BASEBALL HATS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120075

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
VCAP SHIRTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120077

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
VCAP COOLERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120078

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**20182.85**

**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 97 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
V-CAP PULLOVERS PLUS FREIGHT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120093

Date of Disbursement

/   /

Amount of Each Disbursement this Period

329.71

**B.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
VCAP TRAVEL BAGS-R1A

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120285

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4857.71

**C.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
CAP CONFERENCE HATS-R1A

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120286

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5265.50

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

10452.92

**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 98 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1C VCAP SWEATSHIRTS & SHIRTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1192.55

**B.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1C V-CAP PULLOVERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120437

Date of Disbursement

/   /

Amount of Each Disbursement this Period

693.67

**C.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
VCAP TRAVEL BAGS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

54161.68

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

56047.90

**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 99 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
V-CAP T-SHIRTS/JACKETS/FREIGHT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120454

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

1919.58

B.

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
V-CAP T-SHIRTS AND FREIGHT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120461

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

2152.64

C.

Full Name (Last, First, Middle Initial)  
DAN RODGERS SPORTING GOODS

Mailing Address 5340 MONROE STREET

City TOLEDO State OH Zip Code 43623

Purpose of Disbursement  
PLATINUM CLUB JACKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120443

Date of Disbursement

05 / 20 / 2011

Amount of Each Disbursement this Period

886.03

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

4958.25

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 100 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MARTIN DEATER

Mailing Address 904 S WOLF LAKE RD

City State Zip Code  
MUSKEGON MI 49442-3044

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120252

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

NATHAN DONALDSON

Mailing Address 2344 OAK RD

City State Zip Code  
PINCONNING MI 48650

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120108

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

EFFINGER PRINTING COMPANY

Mailing Address 12703 PENNRIDGE DRIVE

City State Zip Code  
BRIDGETON MO 63044

Purpose of Disbursement  
R5 VCAP PROMOTION 2011 CRUISE TICKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120269

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5633.69

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

6383.69

**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 101 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EFFINGER PRINTING COMPANY

Mailing Address 12703 PENNRIDGE DRIVE

City BRIDGETON State MO Zip Code 63044

Purpose of Disbursement  
V-CAP PROMOTION 2011 CRUISE TICKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120421

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

291.40

**B.**

Full Name (Last, First, Middle Initial)

EFFINGER PRINTING COMPANY

Mailing Address 12703 PENNRIDGE DRIVE

City BRIDGETON State MO Zip Code 63044

Purpose of Disbursement  
V-CAP PROMOTION 2011 CRUISE TICKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120423

Date of Disbursement

04 / 21 / 2011

Amount of Each Disbursement this Period

5633.69

**C.**

Full Name (Last, First, Middle Initial)

EFTPS

Mailing Address DEPARTMENT OF TREASURY  
INTERNAL REVENUE SERVICE

City OGDEN State UT Zip Code 84201-0038

Purpose of Disbursement  
TAXES VCAP WINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120065

Date of Disbursement

01 / 13 / 2011

Amount of Each Disbursement this Period

1400.00

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

7325.09

**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 102 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EFTPS

Mailing Address DEPARTMENT OF TREASURY  
INTERNAL REVENUE SERVICE

City OGDEN State UT Zip Code 84201-0038

Purpose of Disbursement  
TAXES VCAP WINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120066

Date of Disbursement

01 / 13 / 2011

Amount of Each Disbursement this Period

560.00

**B.**

Full Name (Last, First, Middle Initial)

EFTPS

Mailing Address DEPARTMENT OF TREASURY  
INTERNAL REVENUE SERVICE

City OGDEN State UT Zip Code 84201-0038

Purpose of Disbursement  
TAXES VCAP WINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120090

Date of Disbursement

02 / 16 / 2011

Amount of Each Disbursement this Period

2800.00

**C.**

Full Name (Last, First, Middle Initial)

EFTPS

Mailing Address DEPARTMENT OF TREASURY  
INTERNAL REVENUE SERVICE

City OGDEN State UT Zip Code 84201-0038

Purpose of Disbursement  
TAXES VCAP WINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120091

Date of Disbursement

02 / 17 / 2011

Amount of Each Disbursement this Period

840.00

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

4200.00

**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 103 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EFTPS

Mailing Address DEPARTMENT OF TREASURY  
INTERNAL REVENUE SERVICE

City OGDEN State UT Zip Code 84201-0038

Purpose of Disbursement  
2010 1120 POL TAXES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120273

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

2127.00

**B.**

Full Name (Last, First, Middle Initial)

ENTERPRISE BANK

Mailing Address 1281 N. WARSON ROAD

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement  
R5 BONDS/V-CAP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120092

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

4300.00

**C.**

Full Name (Last, First, Middle Initial)

ENTERPRISE BANK

Mailing Address 1281 N. WARSON ROAD

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement  
R5 BONDS-V-CAP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120270

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

850.00

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

7277.00

**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 104 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ENTERPRISE BANK

Mailing Address 1281 N. WARSON ROAD

City  
ST. LOUIS

State  
MO

Zip Code  
63132

Purpose of Disbursement  
R5 BONDS-V-CAP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120282

Date of Disbursement

/   /

Amount of Each Disbursement this Period

175.00

**B.**

Full Name (Last, First, Middle Initial)

CAROLYN EVANS

Mailing Address 821 SOUTH BEACON STREET

City  
MUNCIE

State  
IN

Zip Code  
47302

Purpose of Disbursement  
REGION 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120097

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**C.**

Full Name (Last, First, Middle Initial)

EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City  
WAYNE

State  
MI

Zip Code  
48184

Purpose of Disbursement  
DAY OF ACTION STICKERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120412

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2968.00

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

6143.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 105 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City  
WAYNEState  
MIZip Code  
48184Purpose of Disbursement  
VCAP BANDANNA

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120413

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 1 | 5 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2491.00

**B.**

Full Name (Last, First, Middle Initial)

EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City  
WAYNEState  
MIZip Code  
48184Purpose of Disbursement  
RUSH FLYERS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120438

Date of Disbursement

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

Amount of Each Disbursement this Period

1295.32

**C.**

Full Name (Last, First, Middle Initial)

EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City  
WAYNEState  
MIZip Code  
48184Purpose of Disbursement  
BANNER

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120447

Date of Disbursement

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

Amount of Each Disbursement this Period

95.40

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

3881.72

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 106 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>DENNIS GENO   | <b>Transaction ID:</b> SB21B.120256<br><b>Date of Disbursement</b>  |
| Mailing Address 1075 W NEBOBISH RD   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div>  |
| City ESSEXVILLE State MI Zip Code 48732  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>DOLLAR DRIVE WINNERS  | <div>500.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>JOSEPH GRACE  | <b>Transaction ID:</b> SB21B.120259<br><b>Date of Disbursement</b>  |
| Mailing Address 3280 BLUEBIRD DR   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div>  |
| City SAGINAW State MI Zip Code 48601   | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>DOLLAR DRIVE WINNERS  | <div>500.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>GREAT SOUTHERN TRAVEL   | <b>Transaction ID:</b> SB21B.120280<br><b>Date of Disbursement</b>  |
| Mailing Address 6201 MID RIVERS MALL DRIVE   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div>  |
| City ST. CHARLES State MD Zip Code 63304   | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>R5 VCAP CRUISE  | <div>4683.72</div>  |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

5683.72

**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 107 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

GREAT SOUTHERN TRAVEL

Mailing Address 6201 MID RIVERS MALL DRIVE

City State Zip Code  
ST. CHARLES MD 63304

Purpose of Disbursement  
R5 VCAP CRUISE-LAKEISA FULLER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5736.48

**B.**

Full Name (Last, First, Middle Initial)

RICHARD GROVER

Mailing Address 333 BARTLETT ST.

City State Zip Code  
LANSING MI 48911

Purpose of Disbursement  
DOLLAR DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID GUNLOCK

Mailing Address 3638 ELMWOOD CT

City State Zip Code  
VASSAR MI 48768-9452

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120264

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

6736.48

**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 108 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JACK HAGEN

Mailing Address 31217 N CENTER RD

City  
CLIO

State  
MI

Zip Code  
48420

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120249

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

PHILLIP HART JR.

Mailing Address 2351 GARDNER RD.

City  
HUDSON

State  
MI

Zip Code  
49247

Purpose of Disbursement  
DOLLAR DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120345

Date of Disbursement

04 / 12 / 2011

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

BRIAN HOLMBLAD

Mailing Address 214 W JOHANNAH

City  
WHITEHALL

State  
MI

Zip Code  
49461

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120114

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

250.00

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

1250.00

**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 109 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RICHARD HYDE

Mailing Address 6250 BURNINGTREE DR

City State Zip Code  
BURTON MI 48509-2609

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID:** SB21B.120265

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

IMPRESSIONS SPECIALITY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City State Zip Code  
TAYLOR MI 48180

Purpose of Disbursement  
1/4' BLACK CUSTOM SHAPE CLOCK

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID:** SB21B.120425

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4324.80

**C.**

Full Name (Last, First, Middle Initial)

IMPRESSIONS SPECIALITY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City State Zip Code  
TAYLOR MI 48180

Purpose of Disbursement  
R2B 400 PLATINUM CLUB BLANKETS

Candidate Name

Category/  
Type

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

State: District:

**Transaction ID:** SB21B.120435

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12077.00

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

16901.80

**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 110 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)

WILLIAM INGLIS

Mailing Address 318 LESADA

City  
SHELBY

State  
MI

Zip Code  
49455

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120100

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

B.

Full Name (Last, First, Middle Initial)

GLENN JOHNSON

Mailing Address 6585 COUNTRY RIDGE AVE

City  
AUSTINTOWN

State  
OH

Zip Code  
44515-5556

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120263

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

RAYMOND JOHNSON

Mailing Address 119 E. LINSEY BLVD. #2

City  
FLINT

State  
MI

Zip Code  
48503

Purpose of Disbursement  
UNCASHED VCAP PRIZE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.121108

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-100.00

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

10400.00

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 111 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code  
OAK PARK MI 48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120086

Date of Disbursement

/   /

Amount of Each Disbursement this Period

180.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code  
OAK PARK MI 48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120278

Date of Disbursement

/   /

Amount of Each Disbursement this Period

381.99

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code  
OAK PARK MI 48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120279

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

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

621.99

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120086**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120278**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120279**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 114 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120281

Date of Disbursement

/   /

Amount of Each Disbursement this Period

462.07

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120422

Date of Disbursement

/   /

Amount of Each Disbursement this Period

280.36

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120424

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

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

802.43

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120281**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120422**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120424**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 117 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
REIMB FOR HOUSING-MEMPHIS TRIP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120464

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

383.36

**B.**

Full Name (Last, First, Middle Initial)

RONALD KNOTT

Mailing Address 653 E 11TH ST

City  
MIO

State  
MI

Zip Code  
48647

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120106

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

JAY KORF

Mailing Address 15030 S 6TH ST

City  
SCHOOLCRAFT

State  
MI

Zip Code  
49087

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120116

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

250.00

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

883.36

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120464**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 119 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RITA LOGAN

Mailing Address PO BOX 4

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120275

Date of Disbursement

/   /

Amount of Each Disbursement this Period

381.99

**B.**

Full Name (Last, First, Middle Initial)

RITA LOGAN

Mailing Address PO BOX 4

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120284

Date of Disbursement

/   /

Amount of Each Disbursement this Period

387.15

**C.**

Full Name (Last, First, Middle Initial)

RITA LOGAN

Mailing Address PO BOX 4

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.120414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

180.00

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

949.14

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120275**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120284**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120414**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 122 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

RITA LOGAN

Mailing Address PO BOX 4

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
REIMB FOR HOTEL-MEMPHIS TRIP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120465

Date of Disbursement

/   /

Amount of Each Disbursement this Period

383.36

**B.**

Full Name (Last, First, Middle Initial)

MADCO PRINTING AND ADVERTISING

Mailing Address 1715 ELEVENTH ST.

City  
ST. LOUIS

State  
MO

Zip Code  
63104

Purpose of Disbursement  
VCAP BUTTONS REGION 5

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6671.75

**C.**

Full Name (Last, First, Middle Initial)

MARRIOTT HOTELS & RESORTS

Mailing Address 2660 WOODLEY NW

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
BILLING FOR HOSPITALITY ROOM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120095

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3399.56

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

10454.67

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120465**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 124 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

MARRIOTT HOTELS & RESORTS

Mailing Address 2660 WOODLEY NW

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
CBC-MICHAEL JOSEPH

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

227.70

**B.**

Full Name (Last, First, Middle Initial)

JULIANN MILLS

Mailing Address 7325 BURT RD

City  
BIRCH RUN

State  
MI

Zip Code  
48415

Purpose of Disbursement  
DOLLAR DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120395

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

TROY NEWBERRY

Mailing Address 721 POST ST

City  
SAGINAW

State  
MI

Zip Code  
48602

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120254

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1227.70

**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 125 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

AL PRZYDZIAL

Mailing Address 59485 TONESTER CIRCLE

City State Zip Code  
NEW HUDSON MI 48165

Purpose of Disbursement  
REIMB FOR 2011 CAP CONFERENCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120082

Date of Disbursement

/   /

Amount of Each Disbursement this Period

313.37

**B.**

Full Name (Last, First, Middle Initial)

R.A. DINKEL & ASSOCIATES, INC.

Mailing Address PO BOX 700

City State Zip Code  
HOLT MI 48842

Purpose of Disbursement  
R1C V-CAP LAPEL PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120466

Date of Disbursement

/   /

Amount of Each Disbursement this Period

791.25

**C.**

Full Name (Last, First, Middle Initial)

R.A. DINKEL & ASSOCIATES, INC.

Mailing Address PO BOX 700

City State Zip Code  
HOLT MI 48842

Purpose of Disbursement  
R1C V-CAP LAPEL PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120467

Date of Disbursement

/   /

Amount of Each Disbursement this Period

178.30

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

1282.92

**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 126 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>DALE ROTH   | <b>Transaction ID:</b> SB21B.120397<br><b>Date of Disbursement</b>  |
| Mailing Address 14455 NEFF RD  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 2 / 2 0 1 1</div> </div>  |
| City CLIO State MI Zip Code 48420  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>DOLLAR DRIVE  | <div>250.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>JANET SCHULZ  | <b>Transaction ID:</b> SB21B.120069<br><b>Date of Disbursement</b>  |
| Mailing Address 22451 CHERRY HILL  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 1</div> </div>  |
| City DEARBORN State MI Zip Code 48124  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>LEASED EMPLOYEE COSTS   | <div>1230.00</div>  |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>JANET SCHULZ  | <b>Transaction ID:</b> SB21B.120079<br><b>Date of Disbursement</b>  |
| Mailing Address 22451 CHERRY HILL  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 1</div> </div>  |
| City DEARBORN State MI Zip Code 48124  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement<br>LEASED EMPLOYEE COSTS   | <div>1048.62</div>  |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

2528.62

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

**B.** Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120069**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

**C.** Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120079**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 128 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120080

Date of Disbursement

02 / 08 / 2011

Amount of Each Disbursement this Period

850.00

**B.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120087

Date of Disbursement

02 / 08 / 2011

Amount of Each Disbursement this Period

952.56

**C.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120268

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

870.00

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

2672.56

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120080**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120087**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120268**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 131 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City  
DEARBORN

State  
MI

Zip Code  
48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120276

Date of Disbursement

/   /

Amount of Each Disbursement this Period

935.00

**B.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City  
DEARBORN

State  
MI

Zip Code  
48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120419

Date of Disbursement

/   /

Amount of Each Disbursement this Period

932.00

**C.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City  
DEARBORN

State  
MI

Zip Code  
48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120430

Date of Disbursement

/   /

Amount of Each Disbursement this Period

964.00

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

2831.00

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120276**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120419**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120430**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 134 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120436

Date of Disbursement

05 / 12 / 2011

Amount of Each Disbursement this Period

938.81

**B.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120445

Date of Disbursement

05 / 20 / 2011

Amount of Each Disbursement this Period

969.02

**C.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120452

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

978.01

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

2885.84

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120436**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120445**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120452**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 137 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120455

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

978.00

**B.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120458

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

960.00

**C.**

Full Name (Last, First, Middle Initial)

JANET SCHULZ

Mailing Address 22451 CHERRY HILL

City DEARBORN State MI Zip Code 48124

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120474

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

962.52

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

2900.52

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120455**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120458**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

C. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120474**

V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the leased employees directly for reimbursement for out of pocket costs.

# **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 140 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JOSEPH SMITH

Mailing Address 7200 BIRCH RUN RD

City BIRCH RUN State MI Zip Code 48415-8459

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120257

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

PATRICK STEELE

Mailing Address 15100 KNOTTINGHAM DR.

City LINDEN State MI Zip Code 48451

Purpose of Disbursement  
UNCASHED VCAP PRIZE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.121106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-50.00

**C.**

Full Name (Last, First, Middle Initial)

SWIFT PRINTING COMPANY

Mailing Address 404 BRIDGE STREET NW

City GRAND RAPIDS State MI Zip Code 49504

Purpose of Disbursement  
3 CARTONS OF RAFFLE TICKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120416

Date of Disbursement

/   /

Amount of Each Disbursement this Period

291.50

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

741.50

**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 141 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SWIFT PRINTING COMPANY

Mailing Address 404 BRIDGE STREET NW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49504

Purpose of Disbursement  
1000 2010 DIR CLUB BOOKLETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120446

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1892.56

**B.**

Full Name (Last, First, Middle Initial)

TRADEWINDS LLC

Mailing Address 17251 LIVERNOIS AVENUE

City  
DETROIT

State  
MI

Zip Code  
48221

Purpose of Disbursement  
DEPOSIT FOR DETROIT CAP OFFICE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120429

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2550.00

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 1284

Mailing Address PO BOX 356

City  
CHELSEA

State  
MI

Zip Code  
48118

Purpose of Disbursement  
REIMB VCAP DRIVE-STOEY/JUDSON

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120432

Date of Disbursement

/   /

Amount of Each Disbursement this Period

406.84

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

4849.40

**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 142 / 199

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)

UAW LOCAL 2256

Mailing Address 2114 NORTH EAST STREET

City State Zip Code  
 LANSING MI 48906

Purpose of Disbursement  
 REIMB-CLAIRE CORR/ELECTIONS 10

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120089

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4320.09

B.

Full Name (Last, First, Middle Initial)

UAW LOCAL 3000

Mailing Address 22693 VAN HORN ROAD

City State Zip Code  
 WOODHAVEN MI 48183

Purpose of Disbursement  
 LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120068

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8593.14

C.

Full Name (Last, First, Middle Initial)

UAW LOCAL 3000

Mailing Address 22693 VAN HORN ROAD

City State Zip Code  
 WOODHAVEN MI 48183

Purpose of Disbursement  
 REIMB FOR VCAP DRIVE AT LOCAL

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3454.40

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

16367.63

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

**B.** Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120068**

V-CAP leases employees for membership communication and related activities from the Local Unions.  
These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

# **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 144 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>UAW LOCAL 524  | <b>Transaction ID:</b> SB21B.120274<br><b>Date of Disbursement</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 3518 ROBERT T. LONGWAY BLVD.   | <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 9 |  | 2 | 0 | 1 | 1 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 3   |          | 0 | 9 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City FLINT State MI Zip Code 48506   | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>LEASED RESTRICTED CLASS EMP   | <table border="1"> <tr> <td>2068.79</td> </tr> </table>   | 2068.79  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 2068.79  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>UAW LOCAL 600  | <b>Transaction ID:</b> SB21B.120415<br><b>Date of Disbursement</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 10550 DIX  | <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>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 0 |  | 2 | 0 | 1 | 1 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |          | 2 | 0 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City DEARBORN State MI Zip Code 48120  | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>LEASED EMPLOYEE COSTS   | <table border="1"> <tr> <td>20847.93</td> </tr> </table>  | 20847.93 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 20847.93   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>UAW LOCAL 602  | <b>Transaction ID:</b> SB21B.120083<br><b>Date of Disbursement</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 2510 W. MICHIGAN AVE.  | <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>0</td><td>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 2 |  | 0 | 8 |  | 2 | 0 | 1 | 1 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 2   |          | 0 | 8 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City LANSING State MI Zip Code 48917   | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>2010 PHONE BANK TELEPHONE EXP   | <table border="1"> <tr> <td>496.44</td> </tr> </table>  | 496.44   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 496.44   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

23413.16

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

A. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120274**

V-CAP leases employees for membership communication and related activities from the Local Unions.  
These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

B. Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120415**

V-CAP leases employees for membership communication and related activities from the Local Unions.  
These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

# **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 146 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 62

Mailing Address 1002 E. SOUTH STREET

City  
JACKSON

State  
MI

Zip Code  
49203-4405

Purpose of Disbursement  
REIMB FOR R.JAMES-UAW CAP CONF

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120460

Date of Disbursement

06 / 17 / 2011

Amount of Each Disbursement this Period

2609.99

**B.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 652

Mailing Address 426 CLARE STREET

City  
LANSING

State  
MI

Zip Code  
48917

Purpose of Disbursement  
LEASED RESTRICTED CLASS EMP.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120453

Date of Disbursement

06 / 08 / 2011

Amount of Each Disbursement this Period

2239.12

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 659

Mailing Address 4549 VAN SLYKE RD.

City  
FLINT

State  
MI

Zip Code  
48507-2216

Purpose of Disbursement  
2010 PHONE BANKING/ELECTIONS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.120076

Date of Disbursement

02 / 08 / 2011

Amount of Each Disbursement this Period

694.78

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

5543.89

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

**B.** Form/Schedule : **SB21B**  
Transaction ID : **SB21B.120453**

V-CAP leases employees for membership communication and related activities from the Local Unions.  
These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 148 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>UAW LOCAL 898<br>Mailing Address 8975 TEXTILE   | <b>Transaction ID:</b> SB21B.120468<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 3 0 / 2 0 1 1</div> </div>   |
| City YPSILANTI State MI Zip Code 48197-7067<br>Purpose of Disbursement CAP DRIVE REIMBURSEMENT<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   | <b>Amount of Each Disbursement this Period</b><br><div>1151.17</div>   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>UNION PRINTING CO., INC.<br>Mailing Address 1753-59 N. SAGINAW ST.<br>City FLINT State MI Zip Code 48505<br>Purpose of Disbursement V-CAP 2011 POSTERS<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ | <b>Transaction ID:</b> SB21B.120440<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 0 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b><br><div>886.43</div> |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>RANDY VANHOOK<br>Mailing Address 3285 JANES ST<br>City SAGINAW State MI Zip Code 48601<br>Purpose of Disbursement DOLLAR DRIVE WINNERS<br>Candidate Name<br>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:<br>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 | <b>Transaction ID:</b> SB21B.120110<br><b>Date of Disbursement</b><br><div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div> <b>Amount of Each Disbursement this Period</b><br><div>250.00</div> |

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

2287.60

**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 149 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

ROBERT WILK JR

Mailing Address 3288 N FERRIS AVE

City  
WHITE CLOUD

State  
MI

Zip Code  
49349

Purpose of Disbursement  
DOLLAR DRIVE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120112

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM L. CLAY SCHOLARSHIP &

Mailing Address 5441 OSPREY ISLE LANE

City  
ORLANDO

State  
FL

Zip Code  
32819

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.121140

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3500.00

**C.**

Full Name (Last, First, Middle Initial)

WILSON TROPHY COMPANY

Mailing Address 1724 FRIENZA AVE.

City  
SACRAMENTO

State  
CA

Zip Code  
95815

Purpose of Disbursement  
VCAP DIRECTOR/VICTORY PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.120277

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1412.23

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

5162.23

**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 150 / 199

|   |                              |                              |                              |                             |                              |
|---|------------------------------|------------------------------|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)

GEORGIA WOODS

Mailing Address 393 YOCKEY ROAD

City  
MITCHELL

State  
IN

Zip Code  
47446

Purpose of Disbursement  
REGION 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.120064

Date of Disbursement

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

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) .....

282805.98

# **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 151 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
ACKERMAN FOR CONGRESS

Mailing Address PO BOX 95

City FRESH MEADOWS State NY Zip Code 11365

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GARY L ACKERMAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: SB23.120584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
AMERIPAC

Mailing Address 1341 G STREET NW SUITE 200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120517

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
ANDRE' CARSON FOR CONGRESS

Mailing Address ONE N. CAPITOL AVE. #200

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ANDRE CARSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 07

Transaction ID: SB23.120543

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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 152 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
ANNA ESHOO FOR CONGRESS

Mailing Address P.O. BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
UNCASHED CONTRIBUTION CHECK

Candidate Name  
ANNA ESHOO

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 14

Transaction ID: SB23.121132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-1000.00

**B.** Full Name (Last, First, Middle Initial)  
BECERRA FOR CONGRESS

Mailing Address PO BOX 261060

City LOS ANGELES State CA Zip Code 90026

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
XAVIER BECERRA

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: SB23.120491

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
BETTY MCCOLLUM FOR CONGRESS

Mailing Address PO BOX 14131

City ST PAUL State MN Zip Code 55114-0131

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BETTY MCCOLLUM

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 04

Transaction ID: SB23.120564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

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

1250.00

**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 153 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

BETTY SUTTON FOR CONGRESS

Mailing Address 1700 W MARKET ST #155

City AKRON State OH Zip Code 44313

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BETTY S MS. SUTTON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 13

Transaction ID: SB23.120589

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

BILL FOSTER FOR CONGRESS

Mailing Address PO BOX 703

City GENEVA State IL Zip Code 60134

Purpose of Disbursement  
UNCASHED CONTRIBUTION CHECK

Candidate Name  
G. WILLIAM (BIL FOSTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: SB23.121104

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

BILL NELSON FOR U S SENATE

Mailing Address 972 W WHITMIRE DRIVE

City MELBOURNE State FL Zip Code 32935

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BILL NELSON

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 00

Transaction ID: SB23.120532

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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 154 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

## **A.** Full Name (Last, First, Middle Initial) **BILL OWENS FOR CONGRESS**

Mailing Address 12 BRINKERHOFF STREET

City PLATTSBURGH State NY Zip Code 12901

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
WILLIAM OWENS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 23

Transaction ID: SB23.120583

Date of Disbursement

/   /

Amount of Each Disbursement this Period

## **B.** Full Name (Last, First, Middle Initial) **BOBBY SCOTT FOR CONGRESS**

Mailing Address PO BOX 251

City NEWPORT NEWS State VA Zip Code 23607

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROBERT C 'BOBBY' SCOTT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 03

Transaction ID: SB23.120605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

## **C.** Full Name (Last, First, Middle Initial) **BOB CASEY FOR SENATE**

Mailing Address PO BOX 58746

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROBERT P JR CASEY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 00

Transaction ID: SB23.120595

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**4500.00**

**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 155 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
BRAD MILLER FOR CONGRESS CAMPAIGN

Mailing Address 3803 B COMPUTER DRIVE  
SUITE 110

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RALPH BRADLEY MILLER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.120568

Date of Disbursement

03 / 14 / 2011

Amount of Each Disbursement this Period

2000.00

**B.** Full Name (Last, First, Middle Initial)  
BRIDGE PAC

Mailing Address PO BOX 1021

City MENOMINEE State MI Zip Code 49858

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120514

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

2500.00

**C.** Full Name (Last, First, Middle Initial)  
BRUCE BRALEY FOR CONGRESS

Mailing Address 3151 BROCKWAY RD.

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BRUCE L BRALEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 01

Transaction ID: SB23.120537

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

5000.00

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

9500.00

**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 156 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

CARPER FOR SENATE

Mailing Address PO BOX 2882

City  
WILMINGTON

State  
DE

Zip Code  
19805

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
THOMAS R CARPER

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: DE District: 00

Transaction ID: SB23.120526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

CITIZENS FOR BOBBY RUSH

Mailing Address 514 EAST 95TH STREET

City  
CHICAGO

State  
IL

Zip Code  
60619

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BOBBY LEE RUSH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 01

Transaction ID: SB23.120541

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

CITIZENS FOR JOHN OLVER FOR CONGRESS

Mailing Address P.O. Box 819

City  
Amherst

State  
MA

Zip Code  
01004

Purpose of Disbursement  
UNCASHED CONTRIBUTION CHECK

Candidate Name  
JOHN WALTER OLVER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 01

Transaction ID: SB23.121105

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-1500.00

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

500.00

**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 157 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

## **A.** Full Name (Last, First, Middle Initial) CITIZENS TO ELECT RICK LARSEN

Mailing Address PO BOX 326

City EVERETT State WA Zip Code 98206

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RICHARD RAY LARSEN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 02

Transaction ID: SB23.120608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

## **B.** Full Name (Last, First, Middle Initial) CLEAVER FOR CONGRESS

Mailing Address PO BOX 411872

City KANSAS CITY State MO Zip Code 64141

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
EMANUEL CLEAVER II

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 05

Transaction ID: SB23.120566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

## **C.** Full Name (Last, First, Middle Initial) COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH

City MEMPHIS State TN Zip Code 38112

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STEVE I MR. COHEN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 09

Transaction ID: SB23.120600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**11000.00**

**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 158 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

COMMITTEE TO ELECT LINDA SANCHEZ

Mailing Address P.O. BOX 1865

City  
HAWAIIAN GARDENS

State  
CA

Zip Code  
90716

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LINDA SANCHEZ

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 39

**Transaction ID:** SB23.120494

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

CONGRESSIONAL HISPANIC CAUCUS BOLD PAC

Mailing Address 1831 BAY STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.120516

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

CONNECTICUT DEMOCRATIC STATE

Mailing Address 179 ALLYN STREET  
SUITE 301

City  
HARTFORD

State  
CT

Zip Code  
06103

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.120507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3250.00

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

10250.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 159 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

CONYERS FOR CONGRESS

Mailing Address 1833 EAST JEFFERSON AVENUE

City State Zip Code  
DETROIT MI 48207Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN JR. CONYERSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 14

Transaction ID: SB23.120561

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

COURTNEY FOR CONGRESS

Mailing Address PO BOX 1372

City State Zip Code  
VERNON CT 06066Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOSEPH D COURTNEYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 02

Transaction ID: SB23.120505

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 8 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

COURTNEY FOR CONGRESS

Mailing Address PO BOX 1372

City State Zip Code  
VERNON CT 06066Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOSEPH D COURTNEYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: CT District: 02

Convention

Transaction ID: SB23.121115

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**[MEMO ITEM]**

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

6000.00

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

C. Form/Schedule : **SB23**

Re-designation of contribution dated 3/18/11 for \$1000.00.

Transaction ID : **SB23.121115**

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 161 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**Full Name (Last, First, Middle Initial)  
CUMMINGS FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ELIJAH E CUMMINGSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: SB23.120552

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 8 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.**Full Name (Last, First, Middle Initial)  
CUMMINGS FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ELIJAH E CUMMINGSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: SB23.120553

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 0 | 7 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
CUMMINGS FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ELIJAH E CUMMINGSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: SB23.120557

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 162 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
DAVID SCOTT FOR CONGRESS

Mailing Address 162 HURT STREET, NE

City ATLANTA State GA Zip Code 30307

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVID ALBERT SCOTT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 13

Transaction ID: SB23.120533

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
DAVID SCOTT FOR CONGRESS

Mailing Address 162 HURT STREET, NE

City ATLANTA State GA Zip Code 30307

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVID ALBERT SCOTT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 13

Transaction ID: SB23.120534

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
DCCC

Mailing Address 430 SOUTH CAPITOL STREET

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120519

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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 163 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DEBBIE WASSERMAN SCHULTZ FOR CONGRESS</b>   | <b>Transaction ID:</b> SB23.120529<br><b>Date of Disbursement</b>  |
| Mailing Address 1725 MAIN STREET<br>SUITE 215   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 1 1</div> </div>   |
| City WESTON State FL Zip Code 33326   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>5000.00</div>   |
| Candidate Name<br>DEBBIE WASSERMAN SCHULTZ  | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: FL District: 20 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>DEFAZIO FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120592<br><b>Date of Disbursement</b>  |
| Mailing Address PO BOX 1316   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 0 / 2 0 1 1</div> </div>   |
| City SPRINGFIELD State OR Zip Code 97477  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>PETER A DEFAZIO   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: OR District: 04 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>DEMOCRATIC CONGRESSIONAL CAMPAIGN CTE</b>   | <b>Transaction ID:</b> SB23.120523<br><b>Date of Disbursement</b>  |
| Mailing Address 430 S CAPITOL ST, SE  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 1 1</div> </div>   |
| City WASHINGTON State DC Zip Code 20003   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>5000.00</div>   |
| Candidate Name  | <div>Category/Type</div>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |

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

**11000.00**

**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 164 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</b>  | <b>Transaction ID:</b> SB23.120522<br><b>Date of Disbursement</b>  |
| Mailing Address 430 SOUTH CAPITOL STREET SE   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 2 1 / 2 0 1 1</div> </div>   |
| City WASHINGTON State DC Zip Code 20003   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>5000.00</div>   |
| Candidate Name  | <div>Category/Type</div>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>DEMOCRATS WIN SEATS PAC</b>   | <b>Transaction ID:</b> SB23.120530<br><b>Date of Disbursement</b>  |
| Mailing Address 1071 TWIN BRANCH LANE   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 1 1</div> </div>   |
| City WESTON State FL Zip Code 33326   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2000.00</div>   |
| Candidate Name  | <div>Category/Type</div>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>DONNA EDWARDS FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120550<br><b>Date of Disbursement</b>  |
| Mailing Address P.O. BOX 441153   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 8 / 2 0 1 1</div> </div>   |
| City FORT WASHINGTON State MD Zip Code 20749  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>DONNA EDWARDS   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MD District: 04 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

8000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 165 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
DONNA EDWARDS FOR CONGRESS

Mailing Address P.O. BOX 441153

City State Zip Code  
FORT WASHINGTON MD 20749Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DONNA EDWARDSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 04

Transaction ID: SB23.120555

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 0 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
DONNA EDWARDS FOR CONGRESS

Mailing Address P.O. BOX 441153

City State Zip Code  
FORT WASHINGTON MD 20749Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DONNA EDWARDSCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 04

Transaction ID: SB23.120558

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
DONNELLY FOR SENATE

Mailing Address PO BOX 1961

City State Zip Code  
SOUTH BEND IN 46634Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOSEPH S DONNELLYCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 00

Transaction ID: SB23.120546

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 3 | 0 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

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

7000.00

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 166 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DONOVAN FOR CONGRESS

Mailing Address PO BOX 723

City  
MERIDEN

State  
CT

Zip Code  
06450

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHRISTOPHER G DONOVAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Convention

State: CT District: 05

Transaction ID: SB23.120510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

EARL BLUMENAUER FOR CONGRESS

Mailing Address P.O. BOX 1396

City  
PORTLAND

State  
OR

Zip Code  
97207

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
EARL BLUMENAUER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 03

Transaction ID: SB23.120591

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

EARL BLUMENAUER FOR CONGRESS

Mailing Address P.O. BOX 1396

City  
PORTLAND

State  
OR

Zip Code  
97207

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
EARL BLUMENAUER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 03

Transaction ID: SB23.120593

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

8000.00

**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 167 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

FATTAH FOR CONGRESS

Mailing Address 1800 JFK BLVD., SUITE 502

City PHILADELPHIA State PA Zip Code 19103

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHAKA FATTAH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 02

Transaction ID: SB23.120596

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

FREDERICA WILSON FOR CONGRESS

Mailing Address 499 S. CAPITOL S. SW  
 SUITE 422

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
FREDERICA S. WILSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: FL District: 17

Primary Debt

Transaction ID: SB23.120528

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF CHRIS MURPHY

Mailing Address PO BOX 127

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHRISTOPHER S MURPHY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: CT District: 00

Convention

Transaction ID: SB23.120512

Date of Disbursement

06 / 23 / 2011

Amount of Each Disbursement this Period

5000.00

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

11000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 168 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**Full Name (Last, First, Middle Initial)  
FRIENDS OF CHRIS MURPHY

Mailing Address PO BOX 127

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
CHRISTOPHER S MURPHYCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 00

Transaction ID: SB23.120513

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

**B.**Full Name (Last, First, Middle Initial)  
FRIENDS OF GEORGE MILLER

Mailing Address 300 NORTH LEE ST SUITE 500

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
GEORGE MILLERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.120485

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 0 | 9 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2000.00

**C.**Full Name (Last, First, Middle Initial)  
FRIENDS OF GEORGE MILLER

Mailing Address 300 NORTH LEE ST SUITE 500

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
GEORGE MILLERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.120493

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

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

8000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 169 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**Full Name (Last, First, Middle Initial)  
FRIENDS OF GEORGE MILLER

Mailing Address 300 NORTH LEE ST SUITE 500

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
GEORGE MILLERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.120499

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2000.00

**B.**Full Name (Last, First, Middle Initial)  
FRIENDS OF HARRY REID

Mailing Address 245 2ND STREET, NE SUITE 300

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
HARRY REIDCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 00

Transaction ID: SB23.120578

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 4 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2000.00

**C.**Full Name (Last, First, Middle Initial)  
FRIENDS OF JIM CLYBURN

Mailing Address 501 CAPITOL COURT NE SUITE 100

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JAMES E CLYBURNCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC District: 06

Transaction ID: SB23.120599

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 7 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2500.00

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

6500.00

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 170 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF JIM MCDERMOTT

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City MANASSAS State VA Zip Code 20112

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JAMES MCDERMOTT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 07

Transaction ID: SB23.120611

Date of Disbursement

06 / 10 / 2011

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF ROSA DELAURO

Mailing Address 729 15TH STREET, NW - 3RD FLR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROSA DELAURO

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.120504

Date of Disbursement

03 / 09 / 2011

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

GARAMENDI FOR CONGRESS

Mailing Address C/O CALIFORNIA POLITICAL LAW, INC.  
3605 LONG BEACH BLVD., STE. 426

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN GARAMENDI

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: SB23.120482

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

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

5500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 171 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**Full Name (Last, First, Middle Initial)  
GARAMENDI FOR CONGRESSMailing Address C/O CALIFORNIA POLITICAL LAW, INC.  
3605 LONG BEACH BLVD., STE. 426

City LONG BEACH State CA Zip Code 90807

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN GARAMENDICategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 10

Transaction ID: SB23.120495

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 4 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

|         |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|
| 2000.00 |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|

**B.**Full Name (Last, First, Middle Initial)  
GENE GREEN CONGRESSIONAL CAMPAIGN

Mailing Address PO BOX 16128

City HOUSTON State TX Zip Code 77222

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
RAYMOND E. 'GENE' GREENCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 29

Transaction ID: SB23.120601

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 9 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

|         |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|
| 1000.00 |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|

**C.**Full Name (Last, First, Middle Initial)  
GERRY CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DANIEL C CONNOLLYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 18

Transaction ID: SB23.120603

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 0 | 8 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

|         |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|
| 1000.00 |  |  |  |  |  |  |  |  |  |
|---------|--|--|--|--|--|--|--|--|--|

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 172 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
**GERRY CONNOLLY FOR CONGRESS**

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GERRY CONNOLLY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 11

**Transaction ID:** SB23.120604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**GERRY CONNOLLY FOR CONGRESS**

Mailing Address PO BOX 563

City MERRIFIELD State VA Zip Code 22116

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GERRY CONNOLLY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 11

**Transaction ID:** SB23.120606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**GILLIBRAND FOR SENATE**

Mailing Address 15 WEST 26TH STREET, SUITE 4R

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
KIRSTEN ELIZABETH GILLIBRAND

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 00

**Transaction ID:** SB23.120586

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**2250.00**

**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 173 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

HIGGINS FOR CONGRESS

Mailing Address PO BOX 28

City  
BUFFALO

State  
NY

Zip Code  
14220

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BRIAN HIGGINS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 27

Transaction ID: SB23.120587

Date of Disbursement

06 / 30 / 2011

Amount of Each Disbursement this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

HOYER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STENY HAMILTON HOYER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: SB23.120551

Date of Disbursement

02 / 14 / 2011

Amount of Each Disbursement this Period

2500.00

**C.**

Full Name (Last, First, Middle Initial)

INSLEE FOR CONGRESS

Mailing Address PO BOX 33027

City  
SEATTLE

State  
WA

Zip Code  
98133

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JAY R MR. INSLEE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 01

Transaction ID: SB23.120607

Date of Disbursement

03 / 31 / 2011

Amount of Each Disbursement this Period

1000.00

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

3750.00

**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 174 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |   |
|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>INSLEE FOR CONGRESS</b>   | <b>Transaction ID:</b> SB23.120609<br><b>Date of Disbursement</b>   |
| Mailing Address PO BOX 33027  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 4 / 2 0 1 1</div> </div>  |
| City SEATTLE State WA Zip Code 98133  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>  |
| Candidate Name<br>JAY R MR. INSLEE  | <div>Category/Type</div>  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: WA District: 01 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                    |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>JANICE HAHN FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.121078<br><b>Date of Disbursement</b>   |
| Mailing Address 777 S. FIGUEROA STREET, SUITE 4050  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 2 / 2 0 1 1</div> </div>  |
| City LOS ANGELES State CA Zip Code 90017  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2000.00</div>  |
| Candidate Name<br>JANICE HAHN   | <div>Category/Type</div>  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: 36 | Disbursement For: 2011<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>Special-General |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>JANICE HAHN FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120498<br><b>Date of Disbursement</b>   |
| Mailing Address 777 S. FIGUEROA STREET, SUITE 4050  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 1 1</div> </div>  |
| City LOS ANGELES State CA Zip Code 90017  | Amount of Each Disbursement this Period   |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2000.00</div>  |
| Candidate Name<br>JANICE HAHN   | <div>Category/Type</div>  |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: 36 | Disbursement For: 2011<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input checked="" type="checkbox"/> Other (specify) ▼<br>Runoff          |

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

**5000.00**

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

|  |     |  |     |   |     |  |     |  |    |  |     |
|--|-----|--|-----|---|-----|--|-----|--|----|--|-----|
|  | 21b |  | 22  | X | 23  |  | 24  |  | 25 |  | 26  |
|  | 27  |  | 28a |   | 28b |  | 28c |  | 29 |  | 30b |

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

FEC Schedule B ( Form 3X) (Revised 02/2003)

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

JUDY CHU FOR CONGRESS

Mailing Address 1531 PURDUE AVE.

City  
LOS ANGELESState  
CAZip Code  
90025Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JUDY CHUCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 32

Transaction ID: SB23.120484

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 0 | 9 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

KAPTUR FOR CONGRESS COMMITTEE

Mailing Address PO BOX 899

City  
TOLEDOState  
OHZip Code  
43697Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MARCY KAPTURCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 09

Transaction ID: SB23.120588

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 1 | 8 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

KATHY HOCHUL FOR CONGRESS

Mailing Address 4521 COPPERFIELD DRIVE

City  
HAMBURGState  
NYZip Code  
14075Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
KATHLEEN COURTNEY HOCHULCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2011  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: NY District: 26 Special-Primary

Transaction ID: SB23.121079

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

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

7000.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 177 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
KATHY HOCHUL FOR CONGRESS

Mailing Address 4521 COPPERFIELD DRIVE

City HAMBURG State NY Zip Code 14075

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
KATHLEEN COURTNEY HOCHULCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2011  
☐ Primary ☐ General  
☒ Other (specify) ▼  
Special-General

State: NY District: 26

Transaction ID: SB23.121080

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 | / | 2 | 9 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
KILDEE FOR CONGRESS

Mailing Address PO BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DALE KILDEECategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 05

Transaction ID: SB23.120559

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 0 | 8 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
KILDEE FOR CONGRESS

Mailing Address PO BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DALE KILDEECategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 05

Transaction ID: SB23.120560

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 | / | 0 | 8 | / | 2 | 0 | 1 | 1 |

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 178 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
KURT SCHRADER FOR CONGRESS

Mailing Address 607 N. MAIN ST., SUITE 240

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
KURT SCHRADERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 05

Transaction ID: SB23.120590

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 |   | 2 | 0 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
LARRY KISSELL FOR CONGRESS

Mailing Address 106 EAST MAIN STREET

City BISCOE State NC Zip Code 27209

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
LARRY W KISSELLCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.120569

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 3 |   | 1 | 4 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
LARRY KISSELL FOR CONGRESS

Mailing Address 106 EAST MAIN STREET

City BISCOE State NC Zip Code 27209

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
LARRY W KISSELLCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.120570

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 179 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

LARSON FOR CONGRESS

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City MANASSAS State VA Zip Code 20112

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN B LARSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 01

Transaction ID: SB23.120506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)

LARSON FOR CONGRESS

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City MANASSAS State VA Zip Code 20112

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN B LARSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 01

Transaction ID: SB23.120508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)

LAURA RICHARDSON FOR CONGRESS

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LAURA RICHARDSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 37

Transaction ID: SB23.120481

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**4500.00**

**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 180 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
LAURA RICHARDSON FOR CONGRESS

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LAURA RICHARDSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 37

Transaction ID: SB23.120496

Date of Disbursement

05 / 24 / 2011

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
LOEBSACK FOR CONGRESS

Mailing Address 385 EAST COLLEGE ST.

City IOWA CITY State IA Zip Code 52314

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVID WAYNE LOEBSACK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IA District: 02

Transaction ID: SB23.120536

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
LOUISE SLAUGHTER REELECTION COMMITTEE

Mailing Address P.O. BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LOUISE MCINTOSH SLAUGHTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.120581

Date of Disbursement

02 / 18 / 2011

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 181 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
MARTIN HEINRICH FOR CONGRESS

Mailing Address 2118 CENTRAL AVE., SE #71

City ALBUQUERQUE State NM Zip Code 87106

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MARTIN HEINRICH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM District: 01

Transaction ID: SB23.120576

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
MARYLAND DEMOCRATIC PARTY

Mailing Address 188 MAIN STREET - SUITE 1

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MATSUI FOR CONGRESS

Mailing Address 729 15TH STREET, N.W.  
SUITE 300

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DORIS MATSUI

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 05

Transaction ID: SB23.120490

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**4500.00**

**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 182 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|  |  |
|--|--|
| <b>A.</b><br>Full Name (Last, First, Middle Initial)<br>MC NERNEY FOR CONGRESS<br>Mailing Address PO BOX 12022   | <b>Transaction ID:</b> SB23.120486<br><b>Date of Disbursement</b><br><div> <div>03</div> <div>31</div> <div>2011</div> </div>  |
| City PLEASANTON State CA Zip Code 94588<br>Purpose of Disbursement CONTRIBUTION<br>Candidate Name JERRY MCNERNEY<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: CA District: 11   | <b>Amount of Each Disbursement this Period</b><br><div>1000.00</div>   |
| <b>B.</b><br>Full Name (Last, First, Middle Initial)<br>MC NERNEY FOR CONGRESS<br>Mailing Address PO BOX 12022<br>City PLEASANTON State CA Zip Code 94588<br>Purpose of Disbursement CONTRIBUTION<br>Candidate Name JERRY MCNERNEY<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: CA District: 11 | <b>Transaction ID:</b> SB23.120497<br><b>Date of Disbursement</b><br><div> <div>06</div> <div>10</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b><br><div>2000.00</div> |
| <b>C.</b><br>Full Name (Last, First, Middle Initial)<br>MEL WATT FOR CONGRESS<br>Mailing Address PO BOX 36831<br>City CHARLOTTE State NC Zip Code 28236<br>Purpose of Disbursement CONTRIBUTION<br>Candidate Name MELVIN L WATT<br>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼<br>State: NC District: 12    | <b>Transaction ID:</b> SB23.120567<br><b>Date of Disbursement</b><br><div> <div>03</div> <div>09</div> <div>2011</div> </div> <b>Amount of Each Disbursement this Period</b><br><div>2500.00</div> |

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

**5500.00**

**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 183 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>MENENDEZ FOR SENATE</b>   | <b>Transaction ID:</b> SB23.120575<br><b>Date of Disbursement</b>  |
| Mailing Address 1100 VALLEY BROOK AVENUE<br>SUITE #205  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 8 / 2 0 1 1</div> </div>   |
| City LYNDHURST State NJ Zip Code 07071  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>ROBERT MENENDEZ   | <div>Category/Type</div>   |
| Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NJ District: 00 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>MIKE HONDA FOR CONGRESS</b>   | <b>Transaction ID:</b> SB23.120500<br><b>Date of Disbursement</b>  |
| Mailing Address 6132 BOLLINGER RD   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 3 / 2 0 1 1</div> </div>   |
| City SAN JOSE State CA Zip Code 95129   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2000.00</div>   |
| Candidate Name<br>MIKE HONDA  | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: CA District: 15 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>MISSOURI STATE DEMOCRATIC PARTY</b>   | <b>Transaction ID:</b> SB23.121077<br><b>Date of Disbursement</b>  |
| Mailing Address P.O. BOX 719  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 3 / 2 0 1 1</div> </div>   |
| City JEFFERSON CITY State MO Zip Code 65102   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CAMPAIGN CONTRIBUTION  | <div>5000.00</div>   |
| Candidate Name  | <div>Category/Type</div>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For:<br><input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |

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

**8000.00**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 184 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

NADLER FOR CONGRESS

Mailing Address 18 EAST 16TH STREET, SUITE 401

City NEW YORK State NY Zip Code 10003

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JERROLD L MR. NADLERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 08

Transaction ID: SB23.120580

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 8 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

NAPOLITANO FOR CONGRESS

Mailing Address 227 MASSACHUSETTS AVE, NE  
SUITE 101

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
GRACE NAPOLITANOCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 38

Transaction ID: SB23.120502

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

NEW HAMPSHIRE DEMOCRATIC PARTY

Mailing Address 105 NORTH STATE STREET

City CONCORD State NH Zip Code 03301

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120572

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

450.00

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

2450.00

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 185 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

NY VICTORY PROTECTION FUND

Mailing Address 10 G STREET, NE, SUITE 570

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
Voided Contribution dtd 12/9/10 ck#31565

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Recount

Transaction ID: SB23.121114

Date of Disbursement

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

Amount of Each Disbursement this Period

-2500.00

**B.**

Full Name (Last, First, Middle Initial)

PAC TO THE FUTURE

Mailing Address 5910 GLOSTER ROAD

City BETHESDA State MD Zip Code 20816

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120554

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 4 / 1 2 / 2 0 1 1

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

PASTOR FOR ARIZONA COMMITTEE

Mailing Address PO BOX 6554

City PHOENIX State AZ Zip Code 85005-6554

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
EDWARD L PASTOR

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 04

Transaction ID: SB23.120478

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

3500.00

**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 186 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>PASTOR FOR ARIZONA COMMITTEE</b>  | <b>Transaction ID:</b> SB23.120479<br><b>Date of Disbursement</b>  |
| Mailing Address PO BOX 6554   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 4 / 2 0 1 1</div> </div>   |
| City PHOENIX State AZ Zip Code 85005-6554   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2000.00</div>   |
| Candidate Name<br>EDWARD L PASTOR   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 04 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>PAYNE FOR CONGRESS COMMITTEE</b>  | <b>Transaction ID:</b> SB23.120573<br><b>Date of Disbursement</b>  |
| Mailing Address PO BOX 75214  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div>   |
| City WASHINGTON State DC Zip Code 20013-5214  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>2500.00</div>   |
| Candidate Name<br>DONALD M PAYNE  | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NJ District: 10 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>PEOPLE FOR BEN LUJAN</b>  | <b>Transaction ID:</b> SB23.120577<br><b>Date of Disbursement</b>  |
| Mailing Address 422 C STREET, NE LOWER LEVEL  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 8 / 2 0 1 1</div> </div>   |
| City WASHINGTON State DC Zip Code 20002   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>BEN LUJAN   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: NM District: 03 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

**5500.00**

**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 187 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR PATTY MURRAY

Mailing Address PO BOX 3662

City SEATTLE State WA Zip Code 98124

Purpose of Disbursement

CONTRIBUTION

Candidate Name  
PATTY MURRAY

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2016  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 00

Transaction ID: SB23.120610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
PERLMUTTER FOR CONGRESS

Mailing Address 2545 YOUNGFIELD ST.

City GOLDEN State CO Zip Code 80401

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ED PERLMUTTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CO District: 07

Transaction ID: SB23.120503

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
PETERS FOR CONGRESS

Mailing Address PO BOX 226

City BLOOMFIELD HILLS State MI Zip Code 48303

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GARY PETERS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 09

Transaction ID: SB23.120562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200.00

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

2200.00

**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 188 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |   |
|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>POPULIST PAC</b>  | <b>Transaction ID:</b> SB23.120521<br><b>Date of Disbursement</b>   |
| Mailing Address 228 2ND STREET, SE  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div>  |
| City WASHINGTON State DC Zip Code 20003   | Amount of Each Disbursement this Period<br><div>2500.00</div>   |
| Purpose of Disbursement<br>CONTRIBUTION<br>Candidate Name   | <div> <div>Category/Type</div> <div></div> </div>   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District:                  | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼                 |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>RAUL GRIJALVA FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120477<br><b>Date of Disbursement</b>   |
| Mailing Address PO BOX 1242   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 1 1</div> </div>  |
| City TUCSON State AZ Zip Code 85702-1242  | Amount of Each Disbursement this Period<br><div>1000.00</div>   |
| Purpose of Disbursement<br>CONTRIBUTION<br>Candidate Name<br>RAUL M MR. GRIJALVA  | <div> <div>Category/Type</div> <div></div> </div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 07 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>RAUL GRIJALVA FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120480<br><b>Date of Disbursement</b>   |
| Mailing Address PO BOX 1242   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 4 / 2 0 1 1</div> </div>  |
| City TUCSON State AZ Zip Code 85702-1242  | Amount of Each Disbursement this Period<br><div>2000.00</div>   |
| Purpose of Disbursement<br>CONTRIBUTION<br>Candidate Name<br>RAUL M MR. GRIJALVA  | <div> <div>Category/Type</div> <div></div> </div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: AZ District: 07 | Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

**5500.00**

**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 189 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |  |
|---|--|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>REYES FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120602<br><b>Date of Disbursement</b>  |
| Mailing Address 505 E RIO GRANDE  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 7 / 2 0 1 1</div> </div>   |
| City EL PASO State TX Zip Code 79902  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>SILVESTRE REYES   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: TX District: 16 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>RICHMOND FOR CONGRESS</b>   | <b>Transaction ID:</b> SB23.120549<br><b>Date of Disbursement</b>  |
| Mailing Address 499 SOUTH CAPITOL ST.,<br>SW SUITE 422  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div>   |
| City WAHSINGTON State DC Zip Code 20003   | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>1000.00</div>   |
| Candidate Name<br>CEDRIC L. RICHMOND  | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: LA District: 02 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>RUSS CARNAHAN FOR CONGRESS COMMITTEE</b>  | <b>Transaction ID:</b> SB23.120565<br><b>Date of Disbursement</b>  |
| Mailing Address 7370 MANCHESTER, SUITE 20   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 1 1</div> </div>   |
| City ST. LOUIS State MO Zip Code 63143  | Amount of Each Disbursement this Period  |
| Purpose of Disbursement<br>CONTRIBUTION   | <div>5000.00</div>   |
| Candidate Name<br>RUSS CARNAHAN   | <div>Category/Type</div>   |
| Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: MO District: 03 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

**7000.00**

**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 190 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
SCHAKOWSKY FOR CONGRESS

Mailing Address PO BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement

CONTRIBUTION

Candidate Name  
JANICE D SCHAKOWSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.120538

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
SCHAKOWSKY FOR CONGRESS

Mailing Address PO BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JANICE D SCHAKOWSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.120539

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
SCHAKOWSKY FOR CONGRESS

Mailing Address PO BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JANICE D SCHAKOWSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.120540

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

5000.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 191 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

|   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|---|---|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br><b>SCHIFF FOR CONGRESS</b>   | <b>Transaction ID:</b> SB23.120487<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 150 EAST CORSON STREET  | <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>0</td><td>4</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 0 |  | 2 | 0 | 1 | 1 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 4   |         | 2 | 0 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City PASADENA State CA Zip Code 91103   | Amount of Each Disbursement this Period   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>CONTRIBUTION   | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>ADAM SCHIFF   | Category/<br>Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: CA District: 29 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br><b>SHELLEY BERKLEY FOR CONGRESS</b>  | <b>Transaction ID:</b> SB23.120579<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 7432 SILVER PALM COURT  | <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 9 |  | 2 | 0 | 1 | 1 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 3   |         | 0 | 9 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City LAS VEGAS State NV Zip Code 89117  | Amount of Each Disbursement this Period   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>CONTRIBUTION   | <table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>  | 1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>SHELLEY BERKLEY   | Category/<br>Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: NV District: 01 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br><b>SHERMAN FOR CONGRESS COMMITTEE</b>  | <b>Transaction ID:</b> SB23.120483<br><b>Date of Disbursement</b>   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 20929 VENTURA BLVD, BOX 615   | <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>0</td><td>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td> </tr> </table> | M       | M | / | D | D | / | Y | Y | Y | Y | 0 | 3 |  | 0 | 9 |  | 2 | 0 | 1 | 1 |
| M   | M   | /       | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0   | 3   |         | 0 | 9 |   | 2 | 0 | 1 | 1 |   |   |   |   |  |   |   |  |   |   |   |   |
| City WOODLAND HILLS State CA Zip Code 91364   | Amount of Each Disbursement this Period   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>CONTRIBUTION   | <table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>  | 2000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 2000.00   |   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name<br>BRAD MR SHERMAN   | Category/<br>Type   |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input checked="" type="checkbox"/> House<br><input type="checkbox"/> Senate<br><input type="checkbox"/> President<br>State: CA District: 27 | Disbursement For: 2012<br><input checked="" type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼  |         |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 192 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

SHERMAN FOR CONGRESS COMMITTEE

Mailing Address 20929 VENTURA BLVD, BOX 615

City  
WOODLAND HILLSState  
CAZip Code  
91364Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
BRAD MR SHERMANCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 27

Transaction ID: SB23.120492

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 |   | 2 | 4 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

SHERMAN FOR CONGRESS COMMITTEE

Mailing Address 20929 VENTURA BLVD, BOX 615

City  
WOODLAND HILLSState  
CAZip Code  
91364Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
BRAD MR SHERMANCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 27

Transaction ID: SB23.120501

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 2 | 3 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

SOLIDARITY PAC

Mailing Address C/O PERKINS, COIE, LLP  
607 14TH STREET, NW SUITE 800City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.120524

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 |   | 1 | 0 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

5000.00

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

8000.00

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 193 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.** Full Name (Last, First, Middle Initial)  
STEVE ROTHMAN FOR CONGRESS INC.

Mailing Address 38 IVY STREET, S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STEVEN R ROTHMAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 09

Transaction ID: SB23.120574

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
TAMMY BALDWIN FOR CONGRESS

Mailing Address P O BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
TAMMY BALDWIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 02

Transaction ID: SB23.120612

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
TERRI SEWELL FOR CONGRESS

Mailing Address P.O. BOX 1964

City BIRMINGHAM State AL Zip Code 35201

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
TERRI A. SEWELL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 07

Transaction ID: SB23.120476

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**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 194 / 199

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)  
VISCLOSKY FOR CONGRESS

Mailing Address PO BOX 10003

City State Zip Code  
MERRILLVILLE IN 46411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PETER J VISCLOSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 01

**Transaction ID:** SB23.120542

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.**

Full Name (Last, First, Middle Initial)  
VISCLOSKY FOR CONGRESS

Mailing Address PO BOX 10003

City State Zip Code  
MERRILLVILLE IN 46411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PETER J VISCLOSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 01

**Transaction ID:** SB23.120544

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.**

Full Name (Last, First, Middle Initial)  
WHITEHOUSE FOR SENATE

Mailing Address P.O. BOX 40280

City State Zip Code  
PROVIDENCE RI 02940

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
SHELDON II WHITEHOUSE

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 00

**Transaction ID:** SB23.120597

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

**6000.00**

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 195 / 199

|                              |                              |  |                              |                             |                              |
|------------------------------|------------------------------|--|------------------------------|-----------------------------|------------------------------|
| <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 |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

WHITEHOUSE FOR SENATE

Mailing Address P.O. BOX 40280

City  
PROVIDENCEState  
RIZip Code  
02940Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
SHELDON II WHITEHOUSECategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 00

Transaction ID: SB23.120598

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 3 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

WOOLSEY FOR CONGRESS COMMITTEE

Mailing Address PO BOX 750176

City  
PETALUMAState  
CAZip Code  
94975Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
LYNN C WOOLSEYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 06

Transaction ID: SB23.120488

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 4 | / | 2 | 0 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

YARMUTH FOR CONGRESS

Mailing Address 1819 BROWNSBORO ROAD

City  
LOUISVILLEState  
KYZip Code  
40202Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN A MR YARMUTHCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: KY District: 03

Transaction ID: SB23.120547

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

262650.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 196 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

DAYTON RECOUNT FUND

Mailing Address 316 E. HENNEPIN AVE.  
SUITE 201

City MINNEAPOLIS State MN Zip Code 55414

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Recount

Transaction ID: SB29.121082

Date of Disbursement

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

Amount of Each Disbursement this Period

25000.00

**B.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC GOVERNORS' ASSOCIATION

Mailing Address 430 S. CAPITOL SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.120624

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 1 | 7 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

25000.00

**C.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC GOVERNORS' ASSOCIATION

Mailing Address 430 S. CAPITOL SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
REGIONAL POLICY CONFERENCE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.120625

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 6 | / | 2 | 3 | / | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

25000.00

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

75000.00

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 197 / 199

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

LENAWEE DEMOCRATIC PARTY

Mailing Address 634 BEAGLE ROAD

City  
BLISSFIELD

State  
MI

Zip Code  
49228

Purpose of Disbursement  
R1C-JFK MEMORIAL DINNER

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.120621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

550.00

**B.**

Full Name (Last, First, Middle Initial)

NJ UAW CAP COUNCIL

Mailing Address 56 VINEYARD ROAD

City  
EDISON

State  
NJ

Zip Code  
08817

Purpose of Disbursement  
REPLENISHMENT-NJ UAW CAP ACCT.

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.120614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20000.00

**C.**

Full Name (Last, First, Middle Initial)

NJ UAW CAP COUNCIL

Mailing Address 56 VINEYARD ROAD

City  
EDISON

State  
NJ

Zip Code  
08817

Purpose of Disbursement  
REPLENISHMENT OF NJ UAW CAP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.120618

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40000.00

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

60550.00

**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 198 / 199

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

**A.**

Full Name (Last, First, Middle Initial)

NJ UAW PAC ACCOUNT

Mailing Address 56 VINEYARD ROAD

City  
EDISON

State  
NJ

Zip Code  
08817

Purpose of Disbursement  
REPLENISHMENT OF NJ UAW PAC

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.120617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40000.00

**B.**

Full Name (Last, First, Middle Initial)

PA UAW GOOD GOVERNMENT COMMITTEE

Mailing Address 1375 VIRGINIA DRIVE  
SUITE #201

City  
FT. WAHSINGTON

State  
PA

Zip Code  
19034

Purpose of Disbursement  
REPLENISH PA GOOD GOVN COMM

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.120619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50000.00

**C.**

Full Name (Last, First, Middle Initial)

UAW REGION 3 VICTORY FUND

Mailing Address 5850 FORTUNE CIRCLE WEST

City  
INDIANAPOLIS

State  
IN

Zip Code  
46241

Purpose of Disbursement  
REPLENISHMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.120616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

100000.00

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

190000.00

**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 199 / 199

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <input 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 checked="" type="checkbox"/> 29 | <input type="checkbox"/> 30b |

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A.

Full Name (Last, First, Middle Initial)

WESTERN NEW YORK PAC

Mailing Address 4285 GENESEE STREET

City  
BUFFALO

State  
NY

Zip Code  
14225

Purpose of Disbursement  
REIMB EXPENSES GOTV ACTIVITIES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.120615

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 2 |   | 1 | 4 |   | 2 | 0 | 1 | 1 |

Amount of Each Disbursement this Period

16263.50

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

16263.50

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

341813.50