

# 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  
American Maritime Officers Voluntary Political Action Fund

ADDRESS (number and street) 2 West Dixie Highway  
Dania Beach FL 33004  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00027532  
**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 09 01 2006 through 09 30 2006

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 EDWARD KELLY

Signature of Treasurer Electronically Filed by EDWARD KELLY Date 10 17 2006

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		94489.41
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period .....	80553.59									
(c) Total Receipts (from Line 19) .....	36705.00	418200.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	117258.59	512690.33								
<hr/>										
7. Total Disbursements (from Line 31) .....	77540.89	472972.63								
<hr/>										
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	39717.70	39717.70								
<hr/>										
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
<hr/>										
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	30028.00	220041.56
(i) Itemized (use Schedule A) .....	6677.00	196658.75
(ii) Unitemized .....	36705.00	416700.31
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	36705.00	416700.31
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	1500.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.61
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)) .....	36705.00	418200.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	36705.00	418200.92

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	77500.00	454500.00
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	1257.00
(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	1257.00
29. Other Disbursements.....	40.89	17215.63
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))..	77540.89	472972.63
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	77540.89	472972.63

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	36705.00	416700.31
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	1257.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	36705.00	415443.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	1500.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	-1500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. TEOFILO AGUILO JR.</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 08 / 2006
Mailing Address 3800 CELESTE CT. SE		Transaction ID: SA11A1.39894
City PORT ORCHARD	State WA	Zip Code 98366
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. ERIC ANDERSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 10 MacIntosh Rd		Transaction ID: SA11A1.39964
City Norwalk	State CT	Zip Code 06851
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00	
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. ERIC ANDERSEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 15 / 2006
Mailing Address 10 MacIntosh Rd		Transaction ID: SA11A1.39965
City Norwalk	State CT	Zip Code 06851
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period -200.00	
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 7 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JAMES ASLANIS</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address PMB 106 1015 ATLANTIC BLVD.		<b>Transaction ID: SA11A1.39981</b>
City ATLANTIC BCH	State FL	Zip Code 32233
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN BARON</b>		Date of Receipt MM / DD / YYYY 09 / 22 / 2006
Mailing Address P.O. BOX 505		<b>Transaction ID: SA11A1.40167</b>
City POCASSET	State MA	Zip Code 02559
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer RED RIVER HOLDINGS	Occupation Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL BARRY</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 123 Shadow Lawn Avenue		<b>Transaction ID: SA11A1.39918</b>
City Pass Christian	State MS	Zip Code 39571
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	650.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JONATHAN BARTHOLOMEW</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 1428 PRINCESS PAULA DRIVE		<b>Transaction ID: SA11A1.39809</b>
City State Zip Code PORT ORANGE FL 32129	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period -100.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. JONATHAN BARTHOLOMEW</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 1428 PRINCESS PAULA DRIVE		<b>Transaction ID: SA11A1.39810</b>
City State Zip Code PORT ORANGE FL 32129	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. WILLIAM BARTLETT</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 7 MORRISON ROAD		<b>Transaction ID: SA11A1.39783</b>
City State Zip Code ROUND POND ME 04564	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer PACIFIC GULF MARINE INC.	Occupation 2nd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. THOMAS BAYER</b>		Date of Receipt MM / DD / YYYY 09 / 22 / 2006
Mailing Address PO BOX 545		Transaction ID: SA11A1.40118
City ESCANABA	State MI	Zip Code 49829
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 92.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 349.00	

Full Name (Last, First, Middle Initial) <b>B. MARK BEATTY</b>		Date of Receipt MM / DD / YYYY 09 / 22 / 2006
Mailing Address 103 BOSTON POST RD		Transaction ID: SA11A1.40172
City OLD LYME	State CT	Zip Code 06371
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 130.00
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. ERIK BEKKELUND</b>		Date of Receipt MM / DD / YYYY 09 / 22 / 2006
Mailing Address 5 WILFRED ST. APT. #A		Transaction ID: SA11A1.40074
City GORHAM	State NH	Zip Code 03581
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer CROWLEY LINER SERVICES	Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	322.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
JAMES BELAND

Mailing Address 115 W. LINCOLN ST

City ALPENA State MI Zip Code 49707

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 283.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 6

Transaction ID: SA11A1.40117

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
SANDRA BENDIXEN

Mailing Address 5012 6TH AVE NW

City SEATTLE State WA Zip Code 98117

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 3rd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.40039

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
GEORGE BERTHOLET

Mailing Address 2 West Dixie Highway

City Dania Beach State FL Zip Code 33004

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

Name of Employer Various Shipping Companies Occupation MERCHANT MAIRNE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 2 / 2 0 0 6

Transaction ID: SA11A1.40150

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 700.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. STJUART BICAJ</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 111 NORTH MAIN STREET		<b>Transaction ID: SA11A1.39788</b>	
City State Zip Code ROCKLAND ME 04841	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEABULK TANKERS, INC.	Occupation 3rd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. ANTHONY BORNHOFT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 704 4th ave		<b>Transaction ID: SA11A1.39851</b>	
City State Zip Code WINDOM MN 56101	Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer ISPAT INLAND INC.	Occupation 3rd Asst Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 279.00		

Full Name (Last, First, Middle Initial) <b>C. FRANK BOWLEY III</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 93 OHIO STREET		<b>Transaction ID: SA11A1.40173</b>	
City State Zip Code MILLINOCKET ME 04462	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	350.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
PATRICK BRANGAN

Mailing Address 60 PATTISON ST B-12

City ABINGTON State MA Zip Code 02351

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

Name of Employer AMERICAN OVERSEAS MARINE CORP Occupation SECOND MATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.40186

Amount of Each Receipt this Period  
 400.00

**B.** Full Name (Last, First, Middle Initial)  
LAWRENCE BRONSON

Mailing Address 1921 237TH PLACE SE

City BOTHELL State WA Zip Code 98021

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2006

Transaction ID: SA11A1.39852

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
GREGORY BROOKE

Mailing Address 15 Sunset Lane

City Lincoln State ME Zip Code 04457

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 01 / 2006

Transaction ID: SA11A1.39770

Amount of Each Receipt this Period  
 125.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	725.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
GREGORY BROOKE

Mailing Address 15 Sunset Lane

City Lincoln State ME Zip Code 04457

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39772

Amount of Each Receipt this Period  
125.00

**B.** Full Name (Last, First, Middle Initial)  
EUGENE BROWN

Mailing Address 2205 JAMES STREET

City JEFFERSON State LA Zip Code 70121

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

Name of Employer MAERSK LINE LTD Occupation Chief Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39917

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
PATRICK BROWN

Mailing Address 5800 BEACH BLVD  
SUITE 203 #169

City JACKSONVILLE State FL Zip Code 32207

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39842

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	725.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JOHN BUCZKOWSKI</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 1180 LARKE AVE		<b>Transaction ID: SA11A1.40114</b>	
City State Zip Code ROGERS CITY MI 49779	Amount of Each Receipt this Period 117.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEY LAKES, INC.	Occupation 3rd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		

Full Name (Last, First, Middle Initial) <b>B. PAUL CAMMAROTO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 10505 UNITY LANE		<b>Transaction ID: SA11A1.40090</b>	
City State Zip Code POTOMAC MD 20854	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. TREVOR CARDIN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 1244 Cork Drive		<b>Transaction ID: SA11A1.39867</b>	
City State Zip Code Papillion NE 68046	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	717.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. TRISTAN CHAREST</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 48 OLD SAWMILL DRIVE		<b>Transaction ID: SA11A1.40063</b>
City <b>BLUFFTON</b>	State <b>SC</b>	Zip Code <b>29910</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. SHEILA CLOGG</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 6002 GERALD AVENUE		<b>Transaction ID: SA11A1.39822</b>
City <b>PARMA</b>	State <b>OH</b>	Zip Code <b>44129</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 234.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 389.00	

Full Name (Last, First, Middle Initial) <b>C. SEAN CONNOLLY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 182 CENTRE STREET		<b>Transaction ID: SA11A1.40177</b>
City <b>DANVERS</b>	State <b>MA</b>	Zip Code <b>01923</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 450.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>784.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
PETER COOLEY

Mailing Address P.O. BOX 37114

City State Zip Code  
PENSACOLA FL 32526

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

Name of Employer  
AMERICAN OVERSEAS MARINE CORP

Occupation  
3RD ENGINEER STEAM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1200.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39837

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
PETER COOLEY

Mailing Address P.O. BOX 37114

City State Zip Code  
PENSACOLA FL 32526

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

Name of Employer  
AMERICAN OVERSEAS MARINE CORP

Occupation  
3RD ENGINEER STEAM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
800.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39838

Amount of Each Receipt this Period  
-400.00

**C.** Full Name (Last, First, Middle Initial)  
GREGORY COX

Mailing Address 497 WINNACUNNET RD  
APT 3

City State Zip Code  
HAMPTON NH 03842

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

Name of Employer  
INTEROCEAN AMERICAN SHIPPING CORP

Occupation  
3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39782

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL CRISSINGER

Mailing Address 522 CENTAVO WAY

City State Zip Code  
REDDING CA 96003

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP  
Occupation 3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39854

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN D'ALESSANDRO

Mailing Address 15515 PINE MT DR

City State Zip Code  
HOUSTON TX 77084

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

Name of Employer VARIOUS SHIPPING COMPANIES  
Occupation MERCHANT MARINE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.40183

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
HOWARD DANIELS

Mailing Address 721 Kilby Ave

City State Zip Code  
Suffolk VA 23434

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

Name of Employer Maersk  
Occupation MERCHANT MARINE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.39993

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. BRYAN DITTMAR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address P.O. BOX 1257		<b>Transaction ID: SA11A1.39787</b>	
City Ellsworth	State ME	Amount of Each Receipt this Period 1000.00	
Zip Code 04605		Transaction ID: SA11A1.39787	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

Full Name (Last, First, Middle Initial) <b>B. DANIEL DRINKWINE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address P.O. BOX 1421		<b>Transaction ID: SA11A1.40203</b>	
City SUPERIOR	State WI	Amount of Each Receipt this Period 86.00	
Zip Code 54880		Transaction ID: SA11A1.40203	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 86.00	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 339.00		

Full Name (Last, First, Middle Initial) <b>C. RICHEY DUNCAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 61 LONGVIEW DR		<b>Transaction ID: SA11A1.39982</b>	
City GLENMOORE	State PA	Amount of Each Receipt this Period 136.00	
Zip Code 19343		Transaction ID: SA11A1.39982	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 136.00	
Name of Employer GREAT LAKES FLEET, INC.	Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1222.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. RICHEY DUNCAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 61 LONGVIEW DR		<b>Transaction ID: SA11A1.40099</b>	
City GLENMOORE	State PA	Amount of Each Receipt this Period 136.00	
Zip Code 19343			
FEC ID number of contributing federal political committee. C			
Name of Employer GREAT LAKES FLEET, INC.	Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 461.00		

Full Name (Last, First, Middle Initial) <b>B. RICHEY DUNCAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 61 LONGVIEW DR		<b>Transaction ID: SA11A1.40100</b>	
City GLENMOORE	State PA	Amount of Each Receipt this Period -136.00	
Zip Code 19343			
FEC ID number of contributing federal political committee. C			
Name of Employer GREAT LAKES FLEET, INC.	Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00		

Full Name (Last, First, Middle Initial) <b>C. JEFFREY DUNN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 278 BLACK BARON DR.		<b>Transaction ID: SA11A1.39814</b>	
City DELRAN	State NJ	Amount of Each Receipt this Period 150.00	
Zip Code 08075			
FEC ID number of contributing federal political committee. C			
Name of Employer SEABULK INTERNATIONAL	Occupation 2ND ENGINEER DIESEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	150.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. YAN DURAFORT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 190 LEMONDE LAVAL QUEBEC		<b>Transaction ID: SA11A1.40035</b>	
City State Zip Code H7L-1T7 CANADA		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEABULK TANKERS, INC.      Occupation Chief Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. YAN DURAFORT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 190 LEMONDE LAVAL QUEBEC		<b>Transaction ID: SA11A1.40037</b>	
City State Zip Code H7L-1T7 CANADA		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEABULK TANKERS, INC.      Occupation Chief Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. PATRICK EDGELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address BO. LAS LAMPARAS DELA IGLESIA 300N ALAJUELITA		<b>Transaction ID: SA11A1.40045</b>	
City State Zip Code SAN JOSE, COSTA RI		Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTEROCEAN UGLAND MGMT.      Occupation 3rd Asst Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	375.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. PATRICK EDGELL</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address BO. LAS LAMPARAS DELA IGLESIA 300N ALAJUELITA		Transaction ID: SA11A1.40136
City State Zip Code SAN JOSE, COSTA RI		Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) <b>B. JAMES EDWARDS</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 3590 RAINFOREST DR. WEST		Transaction ID: SA11A1.39884
City State Zip Code JACKSONVILLE FL 32277		Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer 3PSC, LLC	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. ANDREW EGRESSY</b>		Date of Receipt M M / D D / Y Y Y Y 0 9 / 0 8 / 2 0 0 6
Mailing Address 11599 GENESEERD		Transaction ID: SA11A1.39908
City State Zip Code EAST CONCORD NY 14055		Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer KEY LAKES, INC.	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 481.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	325.00
<b>TOTAL</b> This Period (last page this line number only) .....	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. PETER EIDENT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 16173 Seneca Lake Circle		<b>Transaction ID: SA11A1.40112</b>
City Crest Hill	State IL	Zip Code 60435-1501
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL FINNIGAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 6221 SOUTH CLAIBORNE AVE #630		<b>Transaction ID: SA11A1.40180</b>
City NEW ORLEANS	State LA	Zip Code 70125
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer MAERSK LINE LTD.	Occupation MASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>C. KARL FISHER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address		<b>Transaction ID: SA11A1.39860</b>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
ROBERT FLUHARTY

Mailing Address 9696 WOODYS RUN

City State Zip Code  
TRAVERSE CITY MI 49684

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 247.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39873

Amount of Each Receipt this Period  
93.00

**B.** Full Name (Last, First, Middle Initial)  
RICHARD FRIZELIS

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39825

Amount of Each Receipt this Period  
146.00

**C.** Full Name (Last, First, Middle Initial)  
PAUL GEIKEN

Mailing Address 7761 Lakeview Drive

City State Zip Code  
Burlington WI 53105

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39881

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	439.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 85		
	<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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JOSEPH GELHAUS</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 73 VILLAGE ST.		<b>Transaction ID: SA11A1.39975</b>
City State Zip Code SATELLITE BEACH FL 32937	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer AMERICAN OVERSEAS MARINE CORP	Occupation 1ST ENGINEER DIESEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. RICCARDO GIANNONE</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 2021 81ST ST		<b>Transaction ID: SA11A1.39910</b>
City State Zip Code BROOKLYN NY 11214	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period -100.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. RICCARDO GIANNONE</b>		Date of Receipt MM / DD / YYYY 09 / 08 / 2006
Mailing Address 2021 81ST ST		<b>Transaction ID: SA11A1.39911</b>
City State Zip Code BROOKLYN NY 11214	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. DEVIN GLOSSIN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 825 CROSSING CT. #104		<b>Transaction ID: SA11A1.39996</b>	
City State Zip Code VIRGINIA BEACH VA 23455		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTEROCEAN UGLAND MGMT CO- RP.		Occupation 3RD ENGINEER STEAM	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID GOTT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 511 SOUTH MAIN		<b>Transaction ID: SA11A1.40128</b>	
City State Zip Code REPUBLIC MO 65738		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMERICAN OVERSEAS MARINE CORP		Occupation RADIO ELECTRONIC OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. CONSTANTINO GOULAS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 131 PALM TRACE LANDINGS DRIVE		<b>Transaction ID: SA11A1.40188</b>	
City State Zip Code Davie FL 33314		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TRANSOCEANIC CABLE SHIP		Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. MICHAEL HAESER II</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 92 SUSAN DR		<b>Transaction ID: SA11A1.39803</b>	
City State Zip Code POUGHQUAG NY 12570	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TRANSOCEANIC CABLE SHIP CO.	Occupation 1ST ENGINEER DIESEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. MARY HANCOCK</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 2350 FAST BREAK LANE		<b>Transaction ID: SA11A1.40069</b>	
City State Zip Code KINGSLEY MI 49649	Amount of Each Receipt this Period 189.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTERLAKE LEASING III, IN-C.	Occupation 2nd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

Full Name (Last, First, Middle Initial) <b>C. GREGORY HARTLEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 617 N CENTER STREET		<b>Transaction ID: SA11A1.40098</b>	
City State Zip Code CORRY PA 16407	Amount of Each Receipt this Period 73.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEY LAKES, INC.	Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	462.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
JOHN HAYDON JR.

Mailing Address 1823 RED MAPLE LN.

City State Zip Code  
TWO HARBORS MN 55616

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

Name of Employer Various Shipping Companies  
Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40125

Amount of Each Receipt this Period  
96.00

**B.** Full Name (Last, First, Middle Initial)  
LAWRENCE HEARN

Mailing Address 3389 SHERIDAN ST  
SUITE #196

City State Zip Code  
HOLLYWOOD FL 33021

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

Name of Employer TRANSOCEANIC CABLE SHIP CO.  
Occupation 2ND ENGINEER STEAM

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39895

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
TOMMY HEATH

Mailing Address

City State Zip Code

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

Name of Employer

Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39885

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	596.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
ERNEST HINSON

Mailing Address 17 PICKET PLACE

City FREEHOLD State NJ Zip Code 07728

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 29 / 2006

Transaction ID: SA11A1.40184

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
JAMES HOFFLING

Mailing Address 575 MILL CREEK DR

City SOUTHOLD State NY Zip Code 11971

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 08 / 2006

Transaction ID: SA11A1.39915

Amount of Each Receipt this Period  
 200.00

**C.** Full Name (Last, First, Middle Initial)  
ALLEN HOWARD

Mailing Address RR1 256J  
WALDRON CROSS RD

City FARMINGTON State NH Zip Code 03835

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

Name of Employer USS TRANSPORT, LLC Occupation 1st Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.39938

Amount of Each Receipt this Period  
 100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	400.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ALLEN HOWARD</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address RR1 256J WALDRON CROSS RD		<b>Transaction ID: SA11A1.39939</b>
City FARMINGTON State NH Zip Code 03835	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer USS TRANSPORT, LLC	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. ALLEN HOWARD</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address RR1 256J WALDRON CROSS RD		<b>Transaction ID: SA11A1.39940</b>
City FARMINGTON State NH Zip Code 03835	Amount of Each Receipt this Period -100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer USS TRANSPORT, LLC	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. ERNEST JACKSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 124 CORINNE RD		<b>Transaction ID: SA11A1.40148</b>
City FORT PIERCE State FL Zip Code 34945	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BELL STEAMSHIP CO.	Occupation 2nd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	400.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ROMAN JARMULA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 1800 EAGLE TRACE BW		<b>Transaction ID: SA11A1.40002</b>	
City State Zip Code PALM HARBOR FL 34685		Amount of Each Receipt this Period 350.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INTEROCEAN UGLAND MGMT. Chief Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. DENZIL JORDAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 208 RIDGEMONT COURT		<b>Transaction ID: SA11A1.40067</b>	
City State Zip Code KINGSLAND GA 31548		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation MAERSK LINE LTD 3rd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. MARIAN KABAT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 1190 South Winery Ave #256		<b>Transaction ID: SA11A1.40219</b>	
City State Zip Code Fresno CA 93727		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation OSPREY SHIP Mgmt SECOND MATE			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	850.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. STEVEN KAFKA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 640 S CURLEY ST		<b>Transaction ID: SA11A1.39871</b>	
City BALTIMORE	State MD	Zip Code 21224	Amount of Each Receipt this Period 250.00
FEC ID number of contributing federal political committee. C			
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) <b>B. DAVID KEPPARD</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address P.O. BOX 281		<b>Transaction ID: SA11A1.40078</b>	
City NORTH BOSTON	State NY	Zip Code 14110	Amount of Each Receipt this Period 81.00
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

Full Name (Last, First, Middle Initial) <b>C. LE ROY KOLENDA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address		<b>Transaction ID: SA11A1.39850</b>	
City	State	Zip Code	Amount of Each Receipt this Period 95.00
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	426.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 85		
	<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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL LA BAR

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
323.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	5	/	2	0	0	6

**Transaction ID:** SA11A1.40015

Amount of Each Receipt this Period  
191.00

**B.** Full Name (Last, First, Middle Initial)  
KAMIN LAMBERTSON

Mailing Address 1317 LIVINGSTON STREET

City State Zip Code  
MANDEVILLE LA 70448

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

Name of Employer Occupation  
INTEROCEAN UGLAND MGMT. Chief Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  

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

**Transaction ID:** SA11A1.40208

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
FRANK LANG

Mailing Address 401 El Portal

City State Zip Code  
SAN ANTONIO TX 78232

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	0	8	/	2	0	0	6

**Transaction ID:** SA11A1.39872

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	491.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ROBERT LEAKE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 5 DRIVERS LANE		<b>Transaction ID: SA11A1.39912</b>	
City State Zip Code CARROLLTON VA 23314	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SAGAMORE SHIPPING, INC.	Occupation Master		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. ROBERT LEE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 800 SE 171ST COURT RD		<b>Transaction ID: SA11A1.40060</b>	
City State Zip Code SILVER SPRINGS FL 34488	Amount of Each Receipt this Period 400.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer OCEAN SHIPS, INC.	Occupation Master		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. CEVAN LE SIEUR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 909 SECOND AVE.		<b>Transaction ID: SA11A1.40133</b>	
City State Zip Code SALT LAKE CITY UT 84103	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEABULK TANKERS, INC.	Occupation Master		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	800.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
SUSAN LIEBLEIN

Mailing Address 2185 MORRISON AVE

City State Zip Code  
LAKEWOOD OH 44117

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

Name of Employer Occupation  
BELL STEAMSHIP CO. 2nd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40109

Amount of Each Receipt this Period  
76.00

**B.** Full Name (Last, First, Middle Initial)  
DAVID LIIMATTA

Mailing Address 4810 RED JACKET SHAFT

City State Zip Code  
CALUMET MI 49913

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 344.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39879

Amount of Each Receipt this Period  
132.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL MAHONEY

Mailing Address 5433 W CRENSHAW ST.

City State Zip Code  
TAMPA FL 33634-3008

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE CORP MASTER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39796

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	608.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. MICHAEL MANION</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 2932 NW 32ND PLACE		<b>Transaction ID: SA11A1.39986</b>
City State Zip Code GAINSVILLE FL 32605	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL MANION</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 2932 NW 32ND PLACE		<b>Transaction ID: SA11A1.39987</b>
City State Zip Code GAINSVILLE FL 32605	Amount of Each Receipt this Period -300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL MANION</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 2932 NW 32ND PLACE		<b>Transaction ID: SA11A1.40104</b>
City State Zip Code GAINSVILLE FL 32605	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	300.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 36 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JOHN MC ANINLEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 615 Howard Creek Ln		<b>Transaction ID: SA11A1.40022</b>
City State Zip Code Stuart FL 34994	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 400.00
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM MC CULLOUGH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 19 HIGHLAND RIDGE RD		<b>Transaction ID: SA11A1.40089</b>
City State Zip Code BARRINGTON NH 03825	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 300.00
Name of Employer OCEAN SHIPS, INC.	Occupation Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. JAMES MC NELIS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 4730 Grandview Ave		<b>Transaction ID: SA11A1.39974</b>
City State Zip Code New Port Richey FL 34652	FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 37 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. MATTHEW MERSINGER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006	
Mailing Address 10466 RIVERSIDE RD.		<b>Transaction ID: SA11A1.40193</b>	
City State Zip Code PORT CHARLOTTE FL 33981	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. JOSEPH MICOMONACO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address P O BOX 679		<b>Transaction ID: SA11A1.39983</b>	
City State Zip Code CLINTON WA 98236	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEALIFT, INC.	Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. MICHELLE MONROE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address 55 Rick's way		<b>Transaction ID: SA11A1.39935</b>	
City State Zip Code Buxton ME 04093	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer TRANSOCEANIC CABLE SHIP	Occupation 2nd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	650.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. MICHELLE MONROE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 55 Rick's way		<b>Transaction ID: SA11A1.40003</b>	
City State Zip Code Buxton ME 04093		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation TRANSOCEANIC CABLE SHIP 2nd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) <b>B. MICHELLE MONROE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 55 Rick's way		<b>Transaction ID: SA11A1.40004</b>	
City State Zip Code Buxton ME 04093		Amount of Each Receipt this Period -200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation TRANSOCEANIC CABLE SHIP 2nd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. MICHELLE MONROE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 55 Rick's way		<b>Transaction ID: SA11A1.40005</b>	
City State Zip Code Buxton ME 04093		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation TRANSOCEANIC CABLE SHIP 2nd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 650.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHELLE MONROE

Mailing Address 55 Rick's way

City Buxton State ME Zip Code 04093

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

Name of Employer TRANSOCEANIC CABLE SHIP Occupation 2nd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.40006

Amount of Each Receipt this Period  
-200.00

**B.** Full Name (Last, First, Middle Initial)  
CHAD MORIN

Mailing Address 98 PIKE ST.

City BIDDEFORD State ME Zip Code 04005

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

Name of Employer SEABULK TANKERS, INC. Occupation 1st Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 22 / 2006

Transaction ID: SA11A1.40161

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
EARL MORRILL

Mailing Address 16 BOW STREET

City NORTHWOOD State NH Zip Code 03261

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.39947

Amount of Each Receipt this Period  
300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>300.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
ROBERT MULLARKY

Mailing Address 11712 C JEFFERSON AVE

City State Zip Code  
NEWPORT NEWS VA 23606

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

Name of Employer Occupation  
MAERSK LINE LTD 2nd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.39992

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
DECLAN MURPHY

Mailing Address 180 Quint Street

City State Zip Code  
Conway NH 03818

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

Name of Employer Occupation  
SEALIFT, INC. 1st Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39899

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
WILLIAM NELSON

Mailing Address 14526 PRATT RD

City State Zip Code  
OSSINEKE MI 49766

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

Name of Employer Occupation  
AMERICAN STEAMSHIP CO. 1st Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 416.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39830

Amount of Each Receipt this Period  
197.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	797.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ANDREW NIMS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address HUIS TEN BOSCH-CHO 16-5 SASEBO-SHI, NAGASAKI-KEN		<b>Transaction ID: SA11A1.40213</b>
City State Zip Code 859-3243 JAPAN	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer MAERSK LINE LTD	Occupation 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY O'CONNELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 2435 WESTBROOK DRIVE		<b>Transaction ID: SA11A1.39824</b>
City State Zip Code TOLEDO OH 43613	Amount of Each Receipt this Period 137.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer OGLEBAY NORTON COMPANY	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.00	

Full Name (Last, First, Middle Initial) <b>C. KEVIN O'MALLEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 19 GREENVILLE RD BLACKROCK		<b>Transaction ID: SA11A1.39794</b>
City State Zip Code DUBLIN IRELAND ZZ	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	637.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. KEVIN O'MALLEY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 19 GREENVILLE RD BLACKROCK		<b>Transaction ID: SA11A1.39795</b>
City DUBLIN IRELAND	State ZZ	Amount of Each Receipt this Period -200.00
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN OLSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 1308 SUNSET BLVD		<b>Transaction ID: SA11A1.40116</b>
City FLINT	State MI	Amount of Each Receipt this Period 146.00
Zip Code 48507		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.00	

Full Name (Last, First, Middle Initial) <b>C. DAVID PAPE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 1643 RHODE ISLAND		<b>Transaction ID: SA11A1.40121</b>
City STURGEON BAY	State WI	Amount of Each Receipt this Period 169.00
Zip Code 54235		
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	115.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ADRIAN PASION</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2006
Mailing Address		<b>Transaction ID: SA11A1.40221</b>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL PATTERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 29 / 2006
Mailing Address 108 39TH DRIVE		<b>Transaction ID: SA11A1.40195</b>
City	State	Zip Code
VERO BEACH	FL	32968
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer MAERSK LINE LTD.	Occupation THIRD MATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. KURT PETERSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 01 / 2006
Mailing Address 24 MAUREEN DR		<b>Transaction ID: SA11A1.39768</b>
City	State	Zip Code
AUGUSTA	ME	04330
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	700.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL PETERSON

Mailing Address P.O. BOX 1406 14377  
PETERSON LANE

City State Zip Code  
BAY MINETTE AL 36507

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

Name of Employer Occupation  
PRONAV SHIP MANAGEMENT, INC. CHIEF ENGINEER STEAM

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.40222

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
LOGAN PHILLIPS

Mailing Address 55 OAKWOOD HILLS DR

City State Zip Code  
EAST ISLIP NY 11730

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39797

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
WILLIAM PHILLIPS

Mailing Address 11886 HILL RD

City State Zip Code  
CHEBOYGAN MI 49721

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
305.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39874

Amount of Each Receipt this Period  
110.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	310.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. WILLIAM PHILLIPS</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 11886 HILL RD		<b>Transaction ID: SA11A1.40009</b>
City <b>CHEBOYGAN</b>	State <b>MI</b>	Zip Code <b>49721</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>117.00</b>
Name of Employer Various Shipping Companies	Occupation <b>Merchant Marine Officer</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>422.00</b>	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM PHILLIPS</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 11886 HILL RD		<b>Transaction ID: SA11A1.40010</b>
City <b>CHEBOYGAN</b>	State <b>MI</b>	Zip Code <b>49721</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>-117.00</b>
Name of Employer Various Shipping Companies	Occupation <b>Merchant Marine Officer</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>305.00</b>	

Full Name (Last, First, Middle Initial) <b>C. JAMES PLOURDE</b>		Date of Receipt MM / DD / YYYY 09 / 15 / 2006
Mailing Address 19 BOLDUC STREET		<b>Transaction ID: SA11A1.39941</b>
City <b>WINSLOW</b>	State <b>ME</b>	Zip Code <b>04901</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period <b>100.00</b>
Name of Employer USS TRANSPORT LLC	Occupation <b>CHIEF ENGINEER DIESEL</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <b>300.00</b>	

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
JAMES PLOURDE

Mailing Address 19 BOLDUC STREET

City WINSLOW State ME Zip Code 04901

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

Name of Employer USS TRANSPORT LLC Occupation CHIEF ENGINEER DIESEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2006

Transaction ID: SA11A1.40151

Amount of Each Receipt this Period  
 100.00

**B.** Full Name (Last, First, Middle Initial)  
JAMES PLOURDE

Mailing Address 19 BOLDUC STREET

City WINSLOW State ME Zip Code 04901

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

Name of Employer USS TRANSPORT LLC Occupation CHIEF ENGINEER DIESEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2006

Transaction ID: SA11A1.40152

Amount of Each Receipt this Period  
 -100.00

**C.** Full Name (Last, First, Middle Initial)  
STEWART POTTER

Mailing Address 88846 BLUE HERON RD.

City SEASIDE State OR Zip Code 97138

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

Name of Employer SEABULK TANKERS, INC. Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 22 / 2006

Transaction ID: SA11A1.40149

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 47 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. RICHARD POULIOT</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 935 OCEAN BLVD.		<b>Transaction ID: SA11A1.39762</b>	
City <b>HAMPTON</b>	State <b>NH</b>	Amount of Each Receipt this Period 120.00	
Zip Code <b>03842</b>		Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 120.00	
Name of Employer INTEROCEAN UGLAND MGMT.		Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 520.00	

Full Name (Last, First, Middle Initial) <b>B. WAYDE PRESNELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006	
Mailing Address		<b>Transaction ID: SA11A1.39877</b>	
City	State	Amount of Each Receipt this Period 99.00	
Zip Code		Amount of Each Receipt this Period 99.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 99.00	
Name of Employer		Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 278.00	

Full Name (Last, First, Middle Initial) <b>C. SEAN PRIBYL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 12008 W. 153rd Street		<b>Transaction ID: SA11A1.40033</b>	
City <b>Overland Park</b>	State <b>KS</b>	Amount of Each Receipt this Period 200.00	
Zip Code <b>66221</b>		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00	
Name of Employer TRANSOCEANIC CABLE SHIP		Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	419.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	419.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
TERRY RADCLIFF

Mailing Address P O BOX 766

City State Zip Code  
FLAGER BEACH FL 32036

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP  
Occupation 1st Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
09 / 01 / 2006

Transaction ID: SA11A1.39821

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
JOSEPH RAVARY

Mailing Address 7813 CRABB RD

City State Zip Code  
TEMPERANCE MI 48182

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

Name of Employer Various Shipping Companies  
Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
311.00

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2006

Transaction ID: SA11A1.39936

Amount of Each Receipt this Period  
98.00

**C.** Full Name (Last, First, Middle Initial)  
KIRK RHODA

Mailing Address 29 SAN GORGONIO DR

City State Zip Code  
REDLANDS CA 92373

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

Name of Employer Various Shipping Companies  
Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2006

Transaction ID: SA11A1.40159

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	498.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER RICHARDS

Mailing Address 7321 NORMANDY ST.

City State Zip Code  
MIRAMAR FL 33023

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39909

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER RICHARDS

Mailing Address 7321 NORMANDY ST.

City State Zip Code  
MIRAMAR FL 33023

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40084

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
JEREMIE RIEHM

Mailing Address 5839 MACKERAL RD

City State Zip Code  
BOKEELIA FL 33922

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

Name of Employer VARIOUS SHIPPING COMPANIES Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.40054

Amount of Each Receipt this Period  
400.00

**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) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
JEREMIE RIEHM

Mailing Address 5839 MACKERAL RD

City State Zip Code  
BOKEELIA FL 33922

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

Name of Employer Occupation  
VARIOUS SHIPPING COMPANIES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40145

Amount of Each Receipt this Period  
600.00

**B.** Full Name (Last, First, Middle Initial)  
JEREMIE RIEHM

Mailing Address 5839 MACKERAL RD

City State Zip Code  
BOKEELIA FL 33922

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

Name of Employer Occupation  
VARIOUS SHIPPING COMPANIES

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40146

Amount of Each Receipt this Period  
-600.00

**C.** Full Name (Last, First, Middle Initial)  
JOHN RIZZO

Mailing Address 4 WINHAM AVENUE

City State Zip Code  
STATEN ISLAND NY 10306

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE CORP 2ND ENGINEER DIESEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39798

Amount of Each Receipt this Period  
100.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
ERIC RODGERS

Mailing Address 80 RED RIVER STREET  
# 107

City State Zip Code  
AUSTIN TX 78701

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

Name of Employer Occupation  
MAERSK LINE LTD 3rd Asst Engineer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40130

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
BARTOLOME ROMERO JR.

Mailing Address 28431 OAKWOOD AVE.

City State Zip Code  
FLAT ROCK MI 48134

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 228.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39829

Amount of Each Receipt this Period  
95.00

**C.** Full Name (Last, First, Middle Initial)  
ROBERT ROSENFELDT

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 307.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.40198

Amount of Each Receipt this Period  
107.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	402.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ROGER SAARELLA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 5190 UPPER PETERSON R OAD		<b>Transaction ID: SA11A1.39849</b>	
City State Zip Code DULUTH MN 55804	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer KEY LAKES, INC.	Occupation Steward		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 374.00		

Full Name (Last, First, Middle Initial) <b>B. MIROSLAW SALAMONIK</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 15617 1ST. AVE. NW		<b>Transaction ID: SA11A1.39811</b>	
City State Zip Code SHORELINE WA 98177	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. ROHAN SAMUELS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 4005 AVE K		<b>Transaction ID: SA11A1.39968</b>	
City State Zip Code BROOKLYN NY 11210	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTREPID PERSON. &	Occupation 1ST ENGINEER DIESEL		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	505.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. MELVIN SANTOS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 769 CALLE RIACHUELO URB. VALLE VERDE		<b>Transaction ID: SA11A1.39892</b>
City PONCE State PR Zip Code 00716	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. MELVIN SANTOS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address 769 CALLE RIACHUELO URB. VALLE VERDE		<b>Transaction ID: SA11A1.39893</b>
City PONCE State PR Zip Code 00716	Amount of Each Receipt this Period -100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer	Aggregate Year-to-Date ▼ 250.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. JOHN SCHAFFER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address		<b>Transaction ID: SA11A1.40135</b>
City State Zip Code	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Occupation	Aggregate Year-to-Date ▼ 275.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. HOWARD SCHOENLY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 817 HICKS ROAD		<b>Transaction ID: SA11A1.39977</b>	
City State Zip Code DICKSON TN 37055		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INTEROCEAN UGLAND MGMT. 2nd Asst Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. HOWARD SCHOENLY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 817 HICKS ROAD		<b>Transaction ID: SA11A1.39979</b>	
City State Zip Code DICKSON TN 37055		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INTEROCEAN UGLAND MGMT. 2nd Asst Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. HOWARD SCHOENLY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 817 HICKS ROAD		<b>Transaction ID: SA11A1.40092</b>	
City State Zip Code DICKSON TN 37055		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation INTEROCEAN UGLAND MGMT. 2nd Asst Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. HOWARD SCHOENLY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 817 HICKS ROAD		<b>Transaction ID: SA11A1.40093</b>	
City State Zip Code DICKSON TN 37055	Amount of Each Receipt this Period -200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTEROCEAN UGLAND MGMT.	Occupation 2nd Asst Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. KARL SCHROEDER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 6045 NORMAN RD.		<b>Transaction ID: SA11A1.39834</b>	
City State Zip Code JEDDO MI 48032	Amount of Each Receipt this Period 158.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 290.00		

Full Name (Last, First, Middle Initial) <b>C. MERLE SCHULTZ</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address		<b>Transaction ID: SA11A1.39857</b>	
City State Zip Code	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	158.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
GUY SETLIFF

Mailing Address 417 KIBE RD.

City ACME State PA Zip Code 15610

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

Name of Employer SEABULK INTERNATIONAL Occupation SECOND MATE

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 01 / 2006

Transaction ID: SA11A1.39869

Amount of Each Receipt this Period  
 75.00

**B.** Full Name (Last, First, Middle Initial)  
EDUARDO SICA

Mailing Address 9851 SAGECASTLE LN

City HOUSTON State TX Zip Code 77089

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

Name of Employer OSPREY SHIP MGMT, INC. Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.40026

Amount of Each Receipt this Period  
 400.00

**C.** Full Name (Last, First, Middle Initial)  
EDUARDO SICA

Mailing Address 9851 SAGECASTLE LN

City HOUSTON State TX Zip Code 77089

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

Name of Employer OSPREY SHIP MGMT, INC. Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 / 15 / 2006

Transaction ID: SA11A1.40028

Amount of Each Receipt this Period  
 600.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1075.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
EDUARDO SICA

Mailing Address 9851 SAGECASTLE LN

City HOUSTON State TX Zip Code 77089

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

Name of Employer OSPREY SHIP MGMT, INC. Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
09 / 15 / 2006

Transaction ID: SA11A1.40029

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
JERRY SMITH

Mailing Address 399 HARWOOD AVE

City SATELLITE BCH State FL Zip Code 32937

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

Name of Employer INTEROCEAN UGLAND MGMT CO- RP. Occupation CHIEF OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
09 / 08 / 2006

Transaction ID: SA11A1.39929

Amount of Each Receipt this Period  
250.00

**C.** Full Name (Last, First, Middle Initial)  
THOMAS SUFAK

Mailing Address ROUTE 1 BOX 90B

City NASHBURN State WI Zip Code 54891

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
09 / 29 / 2006

Transaction ID: SA11A1.40204

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 700.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. THOMAS SUFAK</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address ROUTE 1 BOX 90B		Transaction ID: SA11A1.40205
City <b>NASHBURN</b>	State <b>WI</b>	Zip Code <b>54891</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 150.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. THOMAS SUFAK</b>		Date of Receipt MM / DD / YYYY 09 / 29 / 2006
Mailing Address ROUTE 1 BOX 90B		Transaction ID: SA11A1.40206
City <b>NASHBURN</b>	State <b>WI</b>	Zip Code <b>54891</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period -150.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

Full Name (Last, First, Middle Initial) <b>C. GREGORY SUTTON</b>		Date of Receipt MM / DD / YYYY 09 / 01 / 2006
Mailing Address 715 W. 26TH STREET		Transaction ID: SA11A1.39868
City <b>LYNN HAVEN</b>	State <b>FL</b>	Zip Code <b>32405</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer SAGAMORE SHIPPING, INC.	Occupation Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ROBERT SWINEBURNE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006	
Mailing Address 3047-2 OHJIRO KANAYA-CHO SHIZUOKA KEN, JAPAN 428-0009		Transaction ID: SA11A1.39966	
City State Zip Code		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MAERSK LINE LTD Occupation 3rd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. WILLIAM TAYLOR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address P.O. BOX 1296		Transaction ID: SA11A1.39870	
City State Zip Code GALVESTON TX 77553		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer OCEAN SHIPHOLDINGS, INC. Occupation Master			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>C. GARY THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006	
Mailing Address 246 S 4TH ST.		Transaction ID: SA11A1.39831	
City State Zip Code ROGERS CITY MI 49779		Amount of Each Receipt this Period 110.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	510.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 85
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JOHN THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 1408 52ND AVE. N.E.		<b>Transaction ID: SA11A1.39819</b>
City State Zip Code ST. PETERSBURG FL 33703	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 01 / 2006
Mailing Address 1408 52ND AVE. N.E.		<b>Transaction ID: SA11A1.39820</b>
City State Zip Code ST. PETERSBURG FL 33703	Amount of Each Receipt this Period -300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL THOMPSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address PO BOX 42		<b>Transaction ID: SA11A1.40095</b>
City State Zip Code SAUGATUCK MI 49453	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer BELL STEAMSHIP CO.	Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 331.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 61 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL THOMPSON

Mailing Address PO BOX 42

City State Zip Code  
SAUGATUCK MI 49453

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

Name of Employer Occupation  
BELL STEAMSHIP CO. 3rd Mate

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 331.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 22 / 2006

Transaction ID: SA11A1.40097

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
AARON THUESEN

Mailing Address 139 OLD STAGE ROAD

City State Zip Code  
MILTON VT 05468

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

Name of Employer Occupation  
INTEROCEAN AMERICAN SHIPP-  
ING CORP 3rd Mate

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 293.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 29 / 2006

Transaction ID: SA11A1.40176

Amount of Each Receipt this Period  
152.00

**C.** Full Name (Last, First, Middle Initial)  
BRUCE VAUGHAN

Mailing Address 3382 L BENIOIT RD  
LOT 15

City State Zip Code  
LAKE CHARLES LA 70605

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 900.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.40019

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	852.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 62 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. BRUCE VAUGHAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 3382 L BENIOIT RD LOT 15		<b>Transaction ID: SA11A1.40122</b>	
City State Zip Code LAKE CHARLES LA 70605		Amount of Each Receipt this Period 500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1400.00	

Full Name (Last, First, Middle Initial) <b>B. BRUCE VAUGHAN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 3382 L BENIOIT RD LOT 15		<b>Transaction ID: SA11A1.40123</b>	
City State Zip Code LAKE CHARLES LA 70605		Amount of Each Receipt this Period -500.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 900.00	

Full Name (Last, First, Middle Initial) <b>C. F VOGT JR</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006	
Mailing Address 188 WEBSTER STREET		<b>Transaction ID: SA11A1.40171</b>	
City State Zip Code NEWINGTON CT 06111		Amount of Each Receipt this Period 152.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 442.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	152.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 63 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ROBERT WASSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 5929 HIGHLAND HILLS DR.		<b>Transaction ID: SA11A1.40211</b>
City State Zip Code AUSTIN TX 78731	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. JON WATSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 08 / 2006
Mailing Address		<b>Transaction ID: SA11A1.39878</b>
City State Zip Code	Amount of Each Receipt this Period 131.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 314.00	

Full Name (Last, First, Middle Initial) <b>C. STEVEN WEBSTER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 22 / 2006
Mailing Address 351 ZENITH LANE		<b>Transaction ID: SA11A1.40066</b>
City State Zip Code JUNO BEACH FL 33408	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	431.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 85
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
TIMOTHY WILHITE

Mailing Address 7 THUNDERBIRD

City CONROE State TX Zip Code 77304

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

Name of Employer SEABULK TANKERS, INC. Occupation Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 436.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 15 / 2006

Transaction ID: SA11A1.40058

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
TIMOTHY WILKINS

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 08 / 2006

Transaction ID: SA11A1.39930

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
CHRISTOPHER WILSON

Mailing Address 106 SOUTH BAY ST

City SNOW HILL State MD Zip Code 21863

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

Name of Employer VARIOUS SHIPPING COMPANIES Occupation

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 01 / 2006

Transaction ID: SA11A1.39816

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	800.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 65 / 85
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JEFFREY WRIGHT, II</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 9866 ENTERPRISE LN. NW APT. F301		<b>Transaction ID: SA11A1.40212</b>
City State Zip Code SILVERDALE WA 98383	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00	

Full Name (Last, First, Middle Initial) <b>B. BRIAN YOUNG</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address		<b>Transaction ID: SA11A1.39970</b>
City State Zip Code	Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	30028.00

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. ALAN MOLLOHAN FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39713</b>	
Mailing Address PO BOX 1343		Date of Disbursement 09 / 15 / 2006	
City FAIRMONT	State WV	Zip Code 26555	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WV	District: 01		

Full Name (Last, First, Middle Initial) <b>B. AMERICAN SUCCESS POLITICAL ACTION COMMITTEE</b>		<b>Transaction ID: SB23.39712</b>	
Mailing Address 1155 21ST STREET NW SUITE 300		Date of Disbursement 09 / 15 / 2006	
City WASHINGTON	State DC	Zip Code 20036	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. BARNEY FRANK FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39744</b>	
Mailing Address P O BOX 260		Date of Disbursement 09 / 22 / 2006	
City NEWTONVILLE	State MA	Zip Code 02460	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement Contribution		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MA	District: 04		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> 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 67 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. BOB FILNER FOR CONGRESS</b>		<b>Transaction ID: SB23.39711</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 127868		Amount of Each Disbursement this Period 1000.00
City San Diego State CA Zip Code 92112	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. BRIAN BAIRD FOR CONGRESS</b>		<b>Transaction ID: SB23.39710</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 5016		Amount of Each Disbursement this Period 1000.00
City VANCOUVER State WA Zip Code 98668	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. BRIAN BILBRAY FOR CONGRESS</b>		<b>Transaction ID: SB23.39743</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 2466 Unicornio Street		Amount of Each Disbursement this Period 1000.00
City Carlsbad State CA Zip Code 92009	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 50	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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 68 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. CHET EDWARDS FOR CONGRESS</b>		<b>Transaction ID: SB23.39709</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 23273		Amount of Each Disbursement this Period 1000.00
City WACO State TX Zip Code 76702	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 11	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. CITIZENS FOR JOHN OLVER FOR CONGRESS</b>		<b>Transaction ID: SB23.39708</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 819 PO BOX 819		Amount of Each Disbursement this Period 1000.00
City AMHERST State MA Zip Code 01004	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. COBLE FOR CONGRESS</b>		<b>Transaction ID: SB23.39742</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO Box 1177 PO Box 1177		Amount of Each Disbursement this Period 1000.00
City Greensboro State NC Zip Code 27402	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

**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 69 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO RE-ELECT LORETTA SANCHEZ**

Mailing Address 601 S GLENOAKS BLVD., #208

City BURBANK State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CA District: 47

Transaction ID: SB23.39707

Date of Disbursement

09 / 15 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO RE-ELECT LORETTA SANCHEZ**

Mailing Address 601 S GLENOAKS BLVD., #208

City BURBANK State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: CA District: 47

Transaction ID: SB23.39741

Date of Disbursement

09 / 22 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CONYERS FOR CONGRESS**

Mailing Address 1031 N EDGEWOOD STREET

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: MI District: 14

Transaction ID: SB23.39705

Date of Disbursement

09 / 15 / 2006

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)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. DAVE CAMP FOR CONGRESS 2006</b>		<b>Transaction ID: SB23.39740</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 5915 EASTMAN AVE. SUITE 100 5915 EASTMAN AVE. SUITE 100		Amount of Each Disbursement this Period 1000.00
City MIDLAND State MI Zip Code 48640		
Purpose of Disbursement Contribution Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. DAVID DAVIS VICTORY FUND</b>		<b>Transaction ID: SB23.39753</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address 2016 NORTHWOOD DRIVE		Amount of Each Disbursement this Period 2000.00
City JOHNSON CITY State TN Zip Code 37601		
Purpose of Disbursement Contribution Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. DEFAZIO FOR CONGRESS</b>		<b>Transaction ID: SB23.39739</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO Box 1316		Amount of Each Disbursement this Period 1000.00
City Springfield State OR Zip Code 97477		
Purpose of Disbursement Contribution Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

<b>A. DUNCAN FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address PO BOX 2646 City KNOXVILLE State TN Zip Code 37901 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.39704</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 1000.00
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<b>B. FATTAH FOR CONGRESS</b> Full Name (Last, First, Middle Initial) Mailing Address 3900 Ford Road Suite 12-0 City Philadelphia State PA Zip Code 19131 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 02 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.39738</b> Date of Disbursement 09 / 22 / 2006 Amount of Each Disbursement this Period 4000.00
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<b>C. FRIENDS OF CLAY SHAW</b> Full Name (Last, First, Middle Initial) Mailing Address 2600 N E 14TH STREET CAUSEWAY City POMPANO BEACH State FL Zip Code 33062 Purpose of Disbursement Contribution Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<b>Transaction ID: SB23.39702</b> Date of Disbursement 09 / 15 / 2006 Amount of Each Disbursement this Period 1000.00
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<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF CONGRESSMAN TIM HOLDEN</b>		<b>Transaction ID: SB23.39701</b> Date of Disbursement
Mailing Address 18 N. SECOND STREET PO BOX 37 PO BOX 37		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City SAINT CLAIR	State PA	Zip Code 17970
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 17	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF DON SHERWOOD</b>		<b>Transaction ID: SB23.39700</b> Date of Disbursement
Mailing Address 81 WARREN STREET		<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2006"/>
City TUNKHANNOCK	State PA	Zip Code 18657
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA	District: 10	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JIM OBERSTAR</b>		<b>Transaction ID: SB23.39333</b> Date of Disbursement
Mailing Address 424 Warner Street NW		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City Washington	State DC	Zip Code 20001
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN	District: 08	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="3000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JIM OBERSTAR</b>		Transaction ID: SB23.39698 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address 1017 8th St. NE		Amount of Each Disbursement this Period 2000.00
City Washington State DC Zip Code 20002	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 08		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM SAXTON</b>		Transaction ID: SB23.39697 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 795		Amount of Each Disbursement this Period 1000.00
City MOUNT HOLLY State NJ Zip Code 08060	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF PATRICK J KENNEDY</b>		Transaction ID: SB23.39737 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 1356		Amount of Each Disbursement this Period 2500.00
City PROVIDENCE State RI Zip Code 02901	Purpose of Disbursement Contribution Candidate Name Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01		
Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5500.00
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF ROBERT C BYRD COMMITTEE</b>		<b>Transaction ID: SB23.39735</b> Date of Disbursement
Mailing Address 607 14TH STREET NW SUITE 800		<input type="text" value="09"/> / <input type="text" value="22"/> / <input type="text" value="2006"/>
City WASHINGTON	State DC	Zip Code 20005
Purpose of Disbursement Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WV District: 00		

Full Name (Last, First, Middle Initial) <b>B. GARY MILLER FOR CONGRESS</b>		<b>Transaction ID: SB23.39752</b> Date of Disbursement
Mailing Address 721 S BREA CANYON ROAD SUITE 7		<input type="text" value="09"/> / <input type="text" value="29"/> / <input type="text" value="2006"/>
City DIAMOND BAR	State CA	Zip Code 91789
Purpose of Disbursement Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="2000.00"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 42		

Full Name (Last, First, Middle Initial) <b>C. HOOSIERS SUPPORTING BUYER FOR CONGRESS</b>		<b>Transaction ID: SB23.39332</b> Date of Disbursement
Mailing Address 200 NORTH MAIN ST PO BOX 712		<input type="text" value="09"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City MONTICELLO	State IN	Zip Code 47960
Purpose of Disbursement Contribution	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1500.00"/>
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IN District: 05		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="5500.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. HOYER FOR CONGRESS</b>		Transaction ID: SB23.39696 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 7905 MALCOLM ROAD SUITE 102		Amount of Each Disbursement this Period 1000.00
City CLINTON State MD Zip Code 20735	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. IKE SKELTON FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.39331 Date of Disbursement M M / D D / Y Y Y Y 09 / 11 / 2006
Mailing Address P.O. BOX A		Amount of Each Disbursement this Period 2000.00
City HARRISONVILLE State MO Zip Code 64701	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JD HAYWORTH FOR CONGRESS</b>		Transaction ID: SB23.39695 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 14300 N. Northsight Blvd. #105		Amount of Each Disbursement this Period 1000.00
City Scottsdale State AZ Zip Code 85260	Purpose of Disbursement Contribution	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. JO BONNER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.39694 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address P.O. Box 851232		Amount of Each Disbursement this Period 1000.00
City State Zip Code Mobile AL 36685	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AL District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. JOHN T DOOLITTLE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.39734 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 400 CAPITOL MALL SUITE 1560		Amount of Each Disbursement this Period 1000.00
City State Zip Code SACRAMENTO CA 95814	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 04	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. KEEP NICK RAHALL IN CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.39751 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address P O BOX 64		Amount of Each Disbursement this Period 2500.00
City State Zip Code BECKLEY, WV 25802	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. LATOURETTE FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39733</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 320 KENARDEN DR		Amount of Each Disbursement this Period 1000.00
City HIGHLAND HTS State OH Zip Code 44143	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. LEWIS FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39750</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 9 / 2 0 0 6
Mailing Address PO BOX 247		Amount of Each Disbursement this Period 2500.00
City REDLANDS State CA Zip Code 92373	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 41	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. LOUISE SLAUGHTER RE-ELECTION COMMITTEE</b>		<b>Transaction ID: SB23.39732</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 366 C/O C. BRUCE LAWRENCE		Amount of Each Disbursement this Period 1000.00
City FAIRPORT State NY Zip Code 14450	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 28	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. LUCAS FOR CONGRESS</b>		Transaction ID: SB23.39693 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address PO BOX 1726		Amount of Each Disbursement this Period 1000.00
City OKLAHOMA CITY State OK Zip Code 73101	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. OBEY, DAVID R</b>		Transaction ID: SB23.39716 Date of Disbursement M M / D D / Y Y Y Y 09 / 15 / 2006
Mailing Address 1212 Grand Ave #32		Amount of Each Disbursement this Period 1000.00
City Wausau State WI Zip Code 54403	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 7	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. PEACE THROUGH STRENGTH POLITICAL ACTION COMMITTEE</b>		Transaction ID: SB23.39749 Date of Disbursement M M / D D / Y Y Y Y 09 / 29 / 2006
Mailing Address 1155 21ST STREET NW SUITE 300		Amount of Each Disbursement this Period 2500.00
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> 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 79 / 85

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. PEARCE FOR CONGRESS</b>		Transaction ID: SB23.39747 Date of Disbursement 09 / 29 / 2006	
Mailing Address PO Box 2696		Amount of Each Disbursement this Period 1000.00	
City Hobbs	State NM		Zip Code 88241
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NM District: 02			

Full Name (Last, First, Middle Initial) <b>B. PRICE FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.39730 Date of Disbursement 09 / 22 / 2006	
Mailing Address P. O. Box 1986		Amount of Each Disbursement this Period 1000.00	
City Raleigh	State NC		Zip Code 27602
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NC District: 4			

Full Name (Last, First, Middle Initial) <b>C. PRYCE FOR CONGRESS</b>		Transaction ID: SB23.39692 Date of Disbursement 09 / 15 / 2006	
Mailing Address 145 E RICH STREET		Amount of Each Disbursement this Period 1000.00	
City COLUMBUS	State OH		Zip Code 43215
Purpose of Disbursement Contribution			Category/ Type
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH District: 15			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A. RE-ELECT MCGOVERN COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 60405

City WORCESTER State MA Zip Code 01606

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: MA District: 03

Transaction ID: SB23.39329

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B. REPUBLICAN MAJORITY FUND**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 144  
Suite 300

City Alexandria State VA Zip Code 22313

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.39690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**C. ROS-LEHTINEN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address P O Box 52-2784

City MIAMI State FL Zip Code 33152

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2006  
 Primary  General  
 Other (specify) ▼

State: FL District: 18

Transaction ID: SB23.39729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A. SAFEGUARDING AMERICA BY EXPANDING NATIONAL SECURITY PAC (SAXPAC)**

Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 40118

City WASHINGTON State DC Zip Code 20016

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: SB23.39745

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B. SERRANO FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 275 MADISON AVENUE  
275 MADISON AVENUE

City NEW YORK State NY Zip Code 10016

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: NY District: 16

Disbursement For: 2006  Primary  General  Other (specify) ▼

Transaction ID: SB23.39689

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**C. STUPAK FOR CONGRESS**

Full Name (Last, First, Middle Initial)  
Mailing Address 817 9TH AVENUE  
PO BOX 143

City MENOMINEE State MI Zip Code 49858

Purpose of Disbursement Contribution  
Candidate Name

Office Sought:  House  Senate  President  
State: MI District: 01

Disbursement For: 2006  Primary  General  Other (specify) ▼

Transaction ID: SB23.39727

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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. TOM ALLEN FOR CONGRESS</b>		<b>Transaction ID: SB23.39723</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address P.O. BOX 17766		Amount of Each Disbursement this Period 1000.00
City PORTLAND State ME Zip Code 04112	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. VETERANS' ALLIANCE FOR SECURITY AND DEMOCRACY POLITICAL ACTION COMMITTEE (VETPAC)</b>		<b>Transaction ID: SB23.39719</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 65871		Amount of Each Disbursement this Period 1000.00
City WASHINGTON State DC Zip Code 20035	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WALLY HERGER FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39718</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address PO BOX 1500		Amount of Each Disbursement this Period 1000.00
City CHICO State CA Zip Code 95927	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> 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)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. WALSH FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.39717</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 2 / 2 0 0 6
Mailing Address 306 WINKWORTH PARKWAY		Amount of Each Disbursement this Period 1000.00
City SYRACUSE State NY Zip Code 13215	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. WALTER JONES COMMITTEE 2006</b>		<b>Transaction ID: SB23.39328</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 1 / 2 0 0 6
Mailing Address PO BOX 99667		Amount of Each Disbursement this Period 2000.00
City RALEIGH State NC Zip Code 27624	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 3	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. WESTERN ACTION PAC</b>		<b>Transaction ID: SB23.39686</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 6
Mailing Address PO BOX 982		Amount of Each Disbursement this Period 3000.00
City CASPER State WY Zip Code 82602	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>77500.00</b>

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER:  
(check only one)

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<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

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)

**A.** Federal Express

Mailing Address P.O. Box 1140

City Memphis State TN Zip Code 38101-1140

Purpose of Disbursement  
Shipping Expense

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.39760

Date of Disbursement

/   /

Amount of Each Disbursement this Period

40.89

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

40.89

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

40.89