

# 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 2007 through 09 30 2007

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 2007

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	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		94741.71
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	35736.48									
(c) Total Receipts (from Line 19) .....	31320.00	355652.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	67056.48	450394.62								
7. Total Disbursements (from Line 31) .....	36581.98	419920.12								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	30474.50	30474.50								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
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	7

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	11634.00	140158.91
(i) Itemized (use Schedule A) .....	10186.00	199494.00
(ii) Unitemized .....	21820.00	339652.91
(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) .....	21820.00	339652.91
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	9500.00	16000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	31320.00	355652.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	31320.00	355652.91

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	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.....	35000.00	410800.00
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 .....	600.00	1150.00
(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)) .....	600.00	1150.00
29. Other Disbursements.....	981.98	7970.12
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))..	36581.98	419920.12
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	36581.98	419920.12

**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) .....	21820.00	339652.91
34. Total Contribution Refunds (from Line 28(d)) .....	600.00	1150.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21220.00	338502.91
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	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

**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 / 38
	<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 ARNOLD

Mailing Address P.O. BOX 88051

City State Zip Code  
HONOLULU HI 96830

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 ▼ 500.00

Date of Receipt  
09 / 07 / 2007

Transaction ID: SA11A1.44390

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
GEORGE ARSENAULT

Mailing Address 118 FABYAN WOODSTOCK RD

City State Zip Code  
N. GROSVENORDALE CT 06255

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 ▼ 500.00

Date of Receipt  
09 / 21 / 2007

Transaction ID: SA11A1.44474

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
KENNETH BAGLEY

Mailing Address 3355 HOLLY SPRINGS RD.

City State Zip Code  
MELBOURNE FL 32934

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

Name of Employer PACIFIC GULF MARINE, INC. Occupation MASTER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 13 / 2007

Transaction ID: SA11A1.44441

Amount of Each Receipt this Period  
200.00

<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 7 / 38
	<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)  
MATTHEW BARKER

Mailing Address 94 New Hampshire St

City MILLINOCKET State ME Zip Code 04462

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

Name of Employer INTEROCEAN UGLAND MGMT. Occupation Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
09 / 07 / 2007

Transaction ID: SA11A1.44398

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
ROBERT BARRETT

Mailing Address 4723 STATE RD

City RIDGEVILLE State SC Zip Code 29472

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  
09 / 28 / 2007

Transaction ID: SA11A1.44516

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
JOSEPH BAUM

Mailing Address PO BOX 24  
24 ELM STREET

City S THOMASTON State ME Zip Code 04858

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

Name of Employer SEABULK TANKERS, INC. Occupation 3rd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
09 / 13 / 2007

Transaction ID: SA11A1.44434

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	450.00
<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 / 38
	<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. MARK BEATTY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2007	
Mailing Address 103 BOSTON POST RD		<b>Transaction ID: SA11A1.44425</b>	
City State Zip Code OLD LYME CT 06371		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation INTEROCEAN UGLAND MGMT. 3rd Asst Engineer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) <b>B. TIMOTHY BELL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 415 S DEER WOOD CT		<b>Transaction ID: SA11A1.44409</b>	
City State Zip Code MARBLEHEAD OH 43440		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Various Shipping Companies Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 229.00	

Full Name (Last, First, Middle Initial) <b>C. PHILIP BOUCHONVILLE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 2623 S. RAILROAD STREET		<b>Transaction ID: SA11A1.44531</b>	
City State Zip Code COLLINS OH 44826		Amount of Each Receipt this Period 141.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Various Shipping Companies Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 294.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	291.00
<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 / 38
	<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. MERRICK BROW</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 6322 MESITA DR		<b>Transaction ID: SA11A1.44366</b>	
City SAN DIEGO	State CA	Zip Code 92115	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 ▼ 800.00		

Full Name (Last, First, Middle Initial) <b>B. ARTHUR BURNS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 1822 HOLLY DRIVE		<b>Transaction ID: SA11A1.44368</b>	
City JANESVILLE	State WI	Zip Code 53546	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 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. WILLIAM BUTLER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 74 OLDE HEAD OF THE BAY RD.		<b>Transaction ID: SA11A1.44537</b>	
City BUZZARDS BAY	State MA	Zip Code 02532	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 CHIEF OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	900.00
<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 / 38
	<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)  
STEPHEN BYRNES

Mailing Address 131 West Haven Dr.

City Williamsburg State KY Zip Code 40769

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

Name of Employer USS TRANSPORT, LLC Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 21 / 2007

Transaction ID: SA11A1.44477

Amount of Each Receipt this Period  
100.00

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

Mailing Address 289 N. BIRCH STREET

City VAN State TX Zip Code 75790

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 ▼ 350.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 13 / 2007

Transaction ID: SA11A1.44444

Amount of Each Receipt this Period  
150.00

**C.** Full Name (Last, First, Middle Initial)  
DAVID CENTOFANTI

Mailing Address 17 MARLBOROUGH RD.

City WALTHAM State MA Zip Code 02452

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

Name of Employer PRONAV SHIP MANAGEMENT Occupation 2nd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.44515

Amount of Each Receipt this Period  
250.00

<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 11 / 38
	<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)  
BART CLENDENIN

Mailing Address 111 FARRAGUT DR.

City State Zip Code  
PALM COAST FL 32137

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 ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2007

Transaction ID: SA11A1.44439

Amount of Each Receipt this Period  
300.00

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

Mailing Address 329 SCRUTON POND RD.

City State Zip Code  
BARRINGTON NH 03825

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 ▼  
700.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 28 / 2007

Transaction ID: SA11A1.44505

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
MATTHEW EVEN

Mailing Address 762 KING CIRCLE

City State Zip Code  
LAKE ORION MI 48362

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP  
Occupation 2nd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 13 / 2007

Transaction ID: SA11A1.44428

Amount of Each Receipt this Period  
220.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	820.00
<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 12 / 38
	(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. JOSEPH FLATLEY</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 13 / 2007
Mailing Address P.O. BOX 2732 CK#204 NSF MONEYORDER ONLY		Transaction ID: SA11A1.44421
City <b>SEQUIM</b>	State <b>WA</b>	Zip Code <b>98382</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer <b>TRANSOCEANIC CABLE SHIP</b>	Occupation <b>1st Mate</b>	
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>B. DAVID FOURNIER</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2007
Mailing Address 314 CHURCH RD.		Transaction ID: SA11A1.44473
City <b>READFIELD</b>	State <b>ME</b>	Zip Code <b>04355</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer <b>USS TRANSPORT, LLC</b>	Occupation <b>2nd Asst Engineer</b>	
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. RICHARD FOWLER</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 28 / 2007
Mailing Address RT 4 BOX 140-D		Transaction ID: SA11A1.44503
City <b>ANDALUSIA</b>	State <b>AL</b>	Zip Code <b>36420</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 300.00
Name of Employer <b>MAERSK LINE LTD.</b>	Occupation <b>2ND ENGINEER DIESEL</b>	
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) .....	▶	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 13 / 38
	<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. RAYMOND GROH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address 1815 TIVOLI LANE		<b>Transaction ID: SA11A1.44469</b>	
City State Zip Code SHEBOYGAN WI 53081	Amount of Each Receipt this Period 153.00		
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 ▼ 406.00		

Full Name (Last, First, Middle Initial) <b>B. ERIC HALL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 10 COURTLAND DR.		<b>Transaction ID: SA11A1.44379</b>	
City State Zip Code GROTON CT 06340	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer OSPREY SHIP MGMT, INC.	Occupation THIRD 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>C. LAWRENCE HEARN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 10 / 2007	
Mailing Address 3389 SHERIDAN ST SUITE #196		<b>Transaction ID: SA11A1.44418</b>	
City State Zip Code HOLLYWOOD FL 33021	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TRANSOCEANIC CABLE SHIP CO.	Occupation 2ND ENGINEER STEAM		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	653.00
<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 / 38
	<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)  
GEORGE HERDINA

Mailing Address 1054 S. 19TH PLACE

City State Zip Code  
STURGEON BAY WI 54235

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 ▼ 500.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: SA11A1.44470

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN HERRINGTON

Mailing Address 119 SASSAFRAS DR

City State Zip Code  
VERMILION OH 44089

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

Name of Employer ISPAT INLAND INC. Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 21 / 2007

Transaction ID: SA11A1.44468

Amount of Each Receipt this Period  
100.00

**C.** Full Name (Last, First, Middle Initial)  
MARK HOSEY

Mailing Address 11661 E. LARSON DR

City State Zip Code  
LAKE NEBAGAMON WI 54849

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 ▼ 302.00

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 07 / 2007

Transaction ID: SA11A1.44383

Amount of Each Receipt this Period  
69.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	669.00
<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 / 38
	<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. GEORGE HUTCHINS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2007	
Mailing Address 29 LEAVITT FARM LANE		<b>Transaction ID: SA11A1.44435</b>	
City YORK	State ME	Zip Code 03909	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. GEORGE HYNES</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address PMB 186 70 FRENCHTOWN RD		<b>Transaction ID: SA11A1.44507</b>	
City NORTH KINGSTOWN	State RI	Zip Code 02852	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 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. STEVEN KAYSER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 5685 E TIMBERLINE TRAIL		<b>Transaction ID: SA11A1.44414</b>	
City FLAGSTAFF	State AZ	Zip Code 86004	Amount of Each Receipt this Period 400.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PACIFIC GULF MARINE 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) ..... ▶	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 16 / 38
	<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. EDWARD KOERNER JR</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 13 / 2007	
Mailing Address 1517 Dweitt Lane		<b>Transaction ID: SA11A1.44430</b>	
City State Zip Code Sebastian FL 32958	Amount of Each Receipt this Period 200.00		
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 ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. SCOTT KREGER</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 21 / 2007	
Mailing Address P. O. Box 858		<b>Transaction ID: SA11A1.44489</b>	
City State Zip Code Pine Valley CA 91962	Amount of Each Receipt this Period 200.00		
FEC ID number of contributing federal political committee. C			
Name of Employer MAERSK LINE LTD Occupation 2nd Mate			
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. ROGER KUHLMEY</b>		Date of Receipt M M / D D / Y Y Y Y Y 09 / 07 / 2007	
Mailing Address		<b>Transaction ID: SA11A1.44395</b>	
City State Zip Code	Amount of Each Receipt this Period 100.00		
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 ▼ 300.00		

<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 17 / 38
	<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. FRANK LUKE</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2007	
Mailing Address 5259 LAKEWOOD RD.		<b>Transaction ID: SA11A1.44431</b>	
City <b>DULUTH</b>	State MN	Zip Code 55804	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
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 ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. KEITH MC HUGH</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 1909 MEREDITH RD		<b>Transaction ID: SA11A1.44509</b>	
City <b>VIRGINIA BEACH</b>	State VA	Zip Code 23455	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 ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>C. JOHN MERCALDO</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address		<b>Transaction ID: SA11A1.44448</b>	
City	State	Zip Code	Amount of Each Receipt this Period 200.00
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 ▼ 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:	PAGE 18 / 38
	(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. STUEART MILL</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address 4329 S. PENINSULA DR.		<b>Transaction ID: SA11A1.44481</b>	
City State Zip Code PONCE INLET FL 32127		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation TRANSOCEANIC CABLE SHIP 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>B. ANDREW MILLER</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address		<b>Transaction ID: SA11A1.44467</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 ▼ 350.00	

Full Name (Last, First, Middle Initial) <b>C. JEFFREY MUSK</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 255 W. DIXIE HIGHWAY		<b>Transaction ID: SA11A1.44370</b>	
City State Zip Code Dania Beach FL 33004		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Occupation Various Shipping Companies 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) ..... ▶	550.00
<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 19 / 38
	<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. ADRIAN PASION</b>		Date of Receipt MM / DD / YYYY 09 / 18 / 2007
Mailing Address		Transaction ID: SA11A1.44447
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 ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. MATTHEW PATRIQUIN</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 10 CLARISSA RD		Transaction ID: SA11A1.44361
City	State	Zip Code
CHELMSFORD	MA	01824
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	
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 PETERSON</b>		Date of Receipt MM / DD / YYYY 09 / 21 / 2007
Mailing Address P.O. BOX 1406 14377 PETERSON LANE		Transaction ID: SA11A1.44490
City	State	Zip Code
BAY MINETTE	AL	36507
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 100.00
Name of Employer PRONAV SHIP MANAGEMENT, INC.	Occupation CHIEF ENGINEER STEAM	
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) .....	▶	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:	PAGE 20 / 38
	(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. MICHAEL PETERSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address P.O. BOX 1406 14377 PETERSON LANE		<b>Transaction ID: SA11A1.44492</b>	
City State Zip Code BAY MINETTE AL 36507	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PRONAV SHIP MANAGEMENT, INC.	Occupation CHIEF 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. MICHAEL PETERSON</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address P.O. BOX 1406 14377 PETERSON LANE		<b>Transaction ID: SA11A1.44493</b>	
City State Zip Code BAY MINETTE AL 36507	Amount of Each Receipt this Period -100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PRONAV SHIP MANAGEMENT, INC.	Occupation CHIEF ENGINEER STEAM		
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. JOSEPH RAVARY</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 13 / 2007	
Mailing Address 7813 CRABB RD		<b>Transaction ID: SA11A1.44427</b>	
City State Zip Code TEMPERANCE MI 48182	Amount of Each Receipt this Period 95.00		
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 ▼ 291.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	95.00
<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 / 38
	<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. MICAH SALKIND</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address 4408 N 9TH STREET		<b>Transaction ID: SA11A1.44491</b>	
City <b>TACOMA</b>	State <b>WA</b>	Zip Code <b>98406</b>	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. ROHAN SAMUELS</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 4005 AVE K		<b>Transaction ID: SA11A1.44386</b>	
City <b>BROOKLYN</b>	State <b>NY</b>	Zip Code <b>11210</b>	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		

Full Name (Last, First, Middle Initial) <b>C. CHARLES SCHOPP</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address 737 N. SYCAMORE STREET		<b>Transaction ID: SA11A1.44487</b>	
City <b>LANSING</b>	State <b>MI</b>	Zip Code <b>48906</b>	Amount of Each Receipt this Period 93.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMERICAN STEAMSHIP CO.	Occupation 3rd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	493.00
<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 22 / 38
	<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. JEFFREY STROZZO</b>		Date of Receipt MM / DD / YYYY 09 / 13 / 2007
Mailing Address 308 FLORENCE AVE		<b>Transaction ID: SA11A1.44419</b>
City STATESBORO	State GA	Zip Code 30458
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	

Full Name (Last, First, Middle Initial) <b>B. THOMAS SUFAK</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address ROUTE 1 BOX 90B		<b>Transaction ID: SA11A1.44394</b>
City NASHBURN	State WI	Zip Code 54891
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>C. DARRELL SYKES</b>		Date of Receipt MM / DD / YYYY 09 / 07 / 2007
Mailing Address 391 HOPEWELL RD		<b>Transaction ID: SA11A1.44381</b>
City ELVERSON	State PA	Zip Code 19520
FEC ID number of contributing federal political committee.	<b>C</b>	Amount of Each Receipt this Period 100.00
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP	Occupation Chief 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) .....	▶	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 23 / 38
	<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. AARON THUESEN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007	
Mailing Address 139 OLD STAGE ROAD		<b>Transaction ID: SA11A1.44525</b>	
City <b>MILTON</b>	State <b>VT</b>	Zip Code <b>05468</b>	Amount of Each Receipt this Period 213.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP		Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 213.00	

Full Name (Last, First, Middle Initial) <b>B. MICHAEL VILLA</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007	
Mailing Address 11 HOWELL LANE		<b>Transaction ID: SA11A1.44356</b>	
City <b>CHILMARK</b>	State <b>MA</b>	Zip Code <b>02535</b>	Amount of Each Receipt this Period 150.00
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>C. CHRIS VON HOHENLEITEN</b>		Date of Receipt M M / D D / Y Y Y Y 09 / 21 / 2007	
Mailing Address 75 INTREPID LANE		<b>Transaction ID: SA11A1.44476</b>	
City <b>JAMESTOWN</b>	State <b>RI</b>	Zip Code <b>02835-1830</b>	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 CHIEF 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) ..... ▶	563.00
<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 24 / 38

(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

<b>A.</b> Full Name (Last, First, Middle Initial) PETER WHITING		Date of Receipt M M / D D / Y Y Y Y 09 / 28 / 2007
Mailing Address		<b>Transaction ID:</b> SA11A1.44526
City State Zip Code	Amount of Each Receipt this Period 150.00	
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>B.</b> Full Name (Last, First, Middle Initial) JONATHAN WILLETT		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007
Mailing Address 9850 PAGEWOOD LN #1504		<b>Transaction ID:</b> SA11A1.44371
City State Zip Code HOUSTON TX 77054	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer USS TRANSPORT, LLC	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>C.</b> Full Name (Last, First, Middle Initial) ANDREW WITKOWICKI		Date of Receipt M M / D D / Y Y Y Y 09 / 07 / 2007
Mailing Address		<b>Transaction ID:</b> SA11A1.44387
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	
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) ..... ▶	550.00
<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 25 / 38
	(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)  
WALLACE WRIGLEY

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
0	9		0	7		2	0	0	7

**Transaction ID:** SA11A1.44403

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN YARBER

Mailing Address 208 S. EDGEWOOD DR

City State Zip Code  
STATESBORO GA 30458

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE 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
0	9		2	1		2	0	0	7

**Transaction ID:** SA11A1.44465

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	11634.00

**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 26 / 38
	<input 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 checked="" 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)  
Arcuri for Congress

Mailing Address P.O. Box 8508

City State Zip Code  
Utica NY 13505

FEC ID number of contributing federal political committee. **C** C00418541

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 0 7

**Transaction ID:** SA16.44348

Amount of Each Receipt this Period  
1000.00

VOIDED CHECK

**B.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO RE-ELECT VITO FOSSELLA

Mailing Address PO BOX 131403  
PO BOX 060248

City State Zip Code  
STATEN ISLAND NY 10313

FEC ID number of contributing federal political committee. **C** C00328070

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1000.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 0 7

**Transaction ID:** SA16.44350

Amount of Each Receipt this Period  
1000.00

VOIDED CHECK

**C.** Full Name (Last, First, Middle Initial)  
GLACIER PAC

Mailing Address 818 CONNECTICUT AVENUE, NW

City State Zip Code  
WASHINGTON DC 20006

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 0 9 / 2 8 / 2 0 0 7

**Transaction ID:** SA16.44351

Amount of Each Receipt this Period  
2500.00

VOIDED CHECK

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	4500.00
<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 / 38
	<input 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 checked="" 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)  
HOYER FOR CONGRESS

Mailing Address 7905 MALCOLM ROAD SUITE 102

City State Zip Code  
CLINTON MD 20735

FEC ID number of contributing federal political committee. **C** C00140715

Name of Employer Occupation

Receipt For: 2008  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2007

**Transaction ID:** SA16.44349

Amount of Each Receipt this Period  
2500.00

VOIDED CHECK

**B.** Full Name (Last, First, Middle Initial)  
REPUBLICAN MAJORITY FUND

Mailing Address PO BOX 144 Suite 300

City State Zip Code  
ALEXANDRIA VA 22313

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 09 / 28 / 2007

**Transaction ID:** SA16.44352

Amount of Each Receipt this Period  
2500.00

VOIDED CHECK

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	9500.00

# 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)

PAGE 28 / 38

<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. ABERCROMBIE FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.44328 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address c/o 1357 Kapiolani Blvd. Ste. 1005 c/o 1357 Kapiolani Blvd. Ste. 1005		Amount of Each Disbursement this Period 2500.00
City Honolulu State HI Zip Code 96814	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. BILL SHUSTER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.44325 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address PO BOX 1473		Amount of Each Disbursement this Period 1000.00
City ALTOONA State PA Zip Code 16603	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. CITIZENS FOR JOHN OLVER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.44321 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
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: 2008 <input checked="" 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 29 / 38

<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. CONGRESSMAN BART GORDON COMMITTEE</b>		<b>Transaction ID: SB23.44327</b> Date of Disbursement 09 / 17 / 2007
Mailing Address P.O. BOX 2008		Amount of Each Disbursement this Period 1000.00
City MURFREESBORO State TN Zip Code 37133	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: 06		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>B. DUNCAN D HUNTER FOR CONGRESS</b>		<b>Transaction ID: SB23.44324</b> Date of Disbursement 09 / 17 / 2007
Mailing Address PO BOX 3917		Amount of Each Disbursement this Period 1000.00
City LA MESA State CA Zip Code 91944	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 52		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF BENNIE THOMPSON</b>		<b>Transaction ID: SB23.44320</b> Date of Disbursement 09 / 17 / 2007
Mailing Address P.O. Box 100 P.O. Box 100		Amount of Each Disbursement this Period 2000.00
City Bolton State MS Zip Code 39041	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02		Disbursement For: 2008 <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. FRIENDS OF JIM OBERSTAR</b>		Transaction ID: SB23.44329 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address 1017 8th St NE		Amount of Each Disbursement this Period 1000.00
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: 8	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. GARY MILLER FOR CONGRESS</b>		Transaction ID: SB23.44319 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address 721 S BREA CANYON ROAD SUITE 7		Amount of Each Disbursement this Period 1000.00
City DIAMOND BAR State CA Zip Code 91789	Purpose of Disbursement Contribution	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 42	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. Hillary Clinton for President Exp. Cm</b>		Transaction ID: SB23.44344 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 4 / 2 0 0 7
Mailing Address P. O. Box 77593		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20013	Purpose of Disbursement CONTRIBUTION	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7000.00
<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 31 / 38

<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. ISSA FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.44318 Date of Disbursement
Mailing Address POST OFFICE BOX 760		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
City VISTA	State CA	Zip Code 92085
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: CA	District: 49	

Full Name (Last, First, Middle Initial) <b>B. JO ANN DAVIS FOR CONGRESS INC.</b>		<b>Transaction ID:</b> SB23.44330 Date of Disbursement
Mailing Address PO Box 1834		<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
City Yorktown	State VA	Zip Code 23692
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: VA	District: 01	

Full Name (Last, First, Middle Initial) <b>C. JOHN D. DINGELL FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.44317 Date of Disbursement
Mailing Address 607 14th Street N.W. Suite 800		<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20005
Purpose of Disbursement Contribution		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1000.00"/>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
State: MI	District: 15	

<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)

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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. JOHN LEWIS FOR CONGRESS</b>		<b>Transaction ID: SB23.44331</b> Date of Disbursement 09 / 28 / 2007
Mailing Address PO BOX 2323		Amount of Each Disbursement this Period 1000.00
City ATLANTA	State GA Zip Code 30301	
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LATHAM FOR CONGRESS</b>		<b>Transaction ID: SB23.44335</b> Date of Disbursement 09 / 28 / 2007
Mailing Address P.O. Box 71 PO BOX 71		Amount of Each Disbursement this Period 1000.00
City Clarion	State IA Zip Code 50525	
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LATHAM FOR CONGRESS</b>		<b>Transaction ID: SB23.44336</b> Date of Disbursement 09 / 28 / 2007
Mailing Address P.O. Box 71 PO BOX 71		Amount of Each Disbursement this Period 500.00
City Clarion	State IA Zip Code 50525	
Purpose of Disbursement Contribution Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2500.00
<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. LATOURETTE FOR CONGRESS</b>		<b>Transaction ID: SB23.44313</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address 320 KENARDEN DRIVE		Amount of Each Disbursement this Period 1000.00
City HIGHLAND HGTS 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: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input 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: SB23.44332</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address P.O. Box 247		Amount of Each Disbursement this Period 2000.00
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: 2008 <input checked="" type="checkbox"/> Primary <input 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: SB23.44312</b> Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<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)

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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. MONTANANS FOR TESTER</b>		Transaction ID: SB23.44334 Date of Disbursement 09 / 28 / 2007
Mailing Address PO BOX 1135		Amount of Each Disbursement this Period 1000.00
City HELENA	State MT Zip Code 59624	
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 00		

Full Name (Last, First, Middle Initial) <b>B. MURTHA FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.44333 Date of Disbursement 09 / 28 / 2007
Mailing Address Suite 220 551 Main Street BT FINANCIAL PLAZA SUITE 220		Amount of Each Disbursement this Period 2500.00
City JOHNSTOWN	State PA Zip Code 15901	
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 12		

Full Name (Last, First, Middle Initial) <b>C. REHBERG FOR CONGRESS</b>		Transaction ID: SB23.44311 Date of Disbursement 09 / 17 / 2007
Mailing Address P.O. Box 1597		Amount of Each Disbursement this Period 1000.00
City Helena	State MT Zip Code 59624	
Purpose of Disbursement Contribution Candidate Name		Category/Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MT District: 1		

<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. REPUBLICAN MAJORITY FUND</b>		<b>Transaction ID:</b> SB23.44346 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 2 8 / 2 0 0 7
Mailing Address PO BOX 144 Suite 300		Amount of Each Disbursement this Period 2500.00
City ALEXANDRIA State VA Zip Code 22313	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. RICHARD BURR COMMITTEE</b>		<b>Transaction ID:</b> SB23.44310 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address PO BOX 5928		Amount of Each Disbursement this Period 1000.00
City WINSTON-SALEM State NC Zip Code 27113	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. SPRATT FOR CONGRESS COMMITTEE</b>		<b>Transaction ID:</b> SB23.44314 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 7
Mailing Address PO BOX 830		Amount of Each Disbursement this Period 1000.00
City YORK State SC Zip Code 29745	Purpose of Disbursement Contribution Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 05	Disbursement For: 2008 <input checked="" 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) ..... ▶	(Empty box)

**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)

**A. STEPHANIE TUBBS JONES FOR US CONGRESS**

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: OH District: 11

Transaction ID: SB23.44309

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

1000.00

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

35000.00

# 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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input checked="" 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.** ALAN CARLISLE

Mailing Address 3494 RIDGECLIFFE DR

City FLINT State MI Zip Code 48532

Purpose of Disbursement  
REFUND OF DONATION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28A.44337

Date of Disbursement

09 / 28 / 2007

Amount of Each Disbursement this Period

600.00

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

600.00

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

600.00

**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 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) <b>A. Buchbinder Tunick &amp; Co</b>		<b>Transaction ID: SB29.44338</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 18 / 2007
Mailing Address 6116 Executive Blvd. Suite 201		Amount of Each Disbursement this Period 962.00
City Rockville State MD Zip Code 20852-4920	Purpose of Disbursement ACCOUNTING FEES Candidate Name Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Federal Express</b>		<b>Transaction ID: SB29.44339</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2007
Mailing Address P.O. Box 94515		Amount of Each Disbursement this Period 0.00
City Palatine State IL Zip Code 60094	Purpose of Disbursement DELIVERY CHARGES Candidate Name Category/Type	
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. FEDERAL EXPRESS- 4918</b>		<b>Transaction ID: SB29.44347</b> Date of Disbursement M M / D D / Y Y Y Y 09 / 12 / 2007
Mailing Address PO Box 94515		Amount of Each Disbursement this Period 19.98
City Palatine State IL Zip Code 60094	Purpose of Disbursement DELIVERY CHARGES Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	981.98
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	981.98