

# 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 04 01 2011 through 04 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Jose Leonard

Signature of Treasurer Electronically Filed by Jose Leonard Date 05 19 2011

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

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

**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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		140524.62
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	153166.75									
(c) Total Receipts (from Line 19) .....	29177.49	157044.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	182344.24	297569.24								
7. Total Disbursements (from Line 31) .....	26000.00	141225.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	156344.24	156344.24								
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	4

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	1	1

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A) .....	9101.00	45760.00
(ii) Unitemized .....	18834.00	110034.40
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	27935.00	155794.40
(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) .....	27935.00	155794.40
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 .....	1240.00	1240.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.49	10.22
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)) .....	29177.49	157044.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	29177.49	157044.62

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.....	26000.00	141000.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	225.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	26000.00	141225.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	26000.00	141225.00

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) .....	27935.00	155794.40
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27935.00	155794.40
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) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 22
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) JAMES ANDERSON	Date of Receipt MM / DD / YYYY 04 / 14 / 2011
	Mailing Address 5035 MONROE B-14	<b>Transaction ID:</b> SA11AI.58481
	City State Zip Code GROVES TX 77619	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation AMERICAN OVERSEAS MARINE CORP SECOND MATE 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) MATTHEW BARKER	Date of Receipt MM / DD / YYYY 04 / 11 / 2011
	Mailing Address 94 New Hampshire St	<b>Transaction ID:</b> SA11AI.58449
	City State Zip Code MILLINOCKET ME 04462	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	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 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CHRIS BARTLETT	Date of Receipt MM / DD / YYYY 04 / 28 / 2011
	Mailing Address 158 PAINE AVE. EXT.	<b>Transaction ID:</b> SA11AI.58564
	City State Zip Code MORRISVILLE VT 05661	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RED RIVER HOLDINGS 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) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 22
	<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

<b>A.</b>	Full Name (Last, First, Middle Initial) CHRISTOPHER BEATON	Date of Receipt MM / DD / YYYY 04 / 27 / 2011
	Mailing Address 46187 LEESA COURT	<b>Transaction ID:</b> SA11AI.58587
	City State Zip Code LEXINGTON PARK MD 20653	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RED RIVER HOLDINGS 3rd Asst Engineer	
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) MERRICK BROW	Date of Receipt MM / DD / YYYY 04 / 01 / 2011
	Mailing Address 6322 MESITA DR	<b>Transaction ID:</b> SA11AI.58377
	City State Zip Code SAN DIEGO CA 92115	Amount of Each Receipt this Period 400.00
	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 ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL BURNS JR.	Date of Receipt MM / DD / YYYY 04 / 14 / 2011
	Mailing Address 364 Long Pond Rd	<b>Transaction ID:</b> SA11AI.58476
	City State Zip Code PLYMOUTH MA 02360	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DYN MARINE SERVICES DIV. 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) .....	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 8 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 CLARY

Mailing Address P.O. BOX 18095

City State Zip Code  
PANAMA CITY BEACH FL 32417-8095

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 Y  
0 4 / 1 5 / 2 0 1 1

**Transaction ID:** SA11AI.58501

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
BRYAN DITTMAR

Mailing Address P.O. BOX 1257

City State Zip Code  
Ellsworth ME 04605

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

**Transaction ID:** SA11AI.58474

Amount of Each Receipt this Period  
250.00

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

Mailing Address 26 GLENCOVE AVE.

City State Zip Code  
BANGOR ME 04401

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  
0 4 / 2 5 / 2 0 1 1

**Transaction ID:** SA11AI.58545

Amount of Each Receipt this Period  
150.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **650.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 22  
(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

<p><b>A.</b> Full Name (Last, First, Middle Initial) DAVID HAGNER</p> <p>Mailing Address 57 GREAT BAY DR W.</p> <p>City State Zip Code GREENLAND NH 03840</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AMERICAN OVERSEAS MARINE Master</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 14 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.58472</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">400.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) PHILLIP HOGLE</p> <p>Mailing Address 6900 BUSHNELL RD.</p> <p>City State Zip Code CONNEAUT OH 44030</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation AMERICAN OVERSEAS MARINE CORP 1ST ENGINEER DIESEL</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">400.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 04 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.58387</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) MATS HOLMQUIST</p> <p>Mailing Address 921 OLD METAIRIE PL.</p> <p>City State Zip Code METAIRIE LA 70001</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation INTEROCEAN UGLAND MGMT. Chief Engineer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">500.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">04 / 19 / 2011</span></p> <p><b>Transaction ID:</b> SA11AI.58515</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">500.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">1000.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 22
	<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) FRANK JOPE		Date of Receipt
	Mailing Address P.O. BOX 3059		<input type="text" value="04"/> / <input type="text" value="05"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	NORTH CONWAY	NH	03860
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58398
Name of Employer INTEROCEAN UGLAND MGMT.		Occupation Chief Mate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>	<input type="text" value="400.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) PETER JORGENSEN		Date of Receipt
	Mailing Address 634 IANA ST.		<input type="text" value="04"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	KAILUA	HI	96734
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58385
Name of Employer MAERSK LINE LTD		Occupation 2nd Mate	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="250.00"/>	<input type="text" value="250.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT KIEFER		Date of Receipt
	Mailing Address 89 BARKER AVE		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City	State	Zip Code
	SHARON HILL	PA	19079
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58613
Name of Employer Various Shipping Companies		Occupation Merchant Marine Officer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="204.00"/>	<input type="text" value="60.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="710.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 22  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    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 KNAUSS

Mailing Address P.O. BOX 193

City State Zip Code  
SPENCERTOWN NY 12156

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

Name of Employer Occupation  
TRANSOCEANIC CABLE SHIP 1st Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
04 / 01 / 2011

**Transaction ID:** SA11AI.58376

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
KENNETH KOONTZ

Mailing Address 802 Holly Avenue

City State Zip Code  
LeMoore CA 93245

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  
MM / DD / YYYY  
04 / 26 / 2011

**Transaction ID:** SA11AI.58572

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
CRAIG NIEDZIELSKI

Mailing Address 13249 Liahona Avenue

City State Zip Code  
Jacksonville FL 32225

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 ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 20 / 2011

**Transaction ID:** SA11AI.58529

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 22
	<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) JAMES NOLEN	Date of Receipt MM / DD / YYYY 04 / 27 / 2011
	Mailing Address 321 PALM ISLES CT	<b>Transaction ID:</b> SA11AI.58586
	City State Zip Code PUNTA GORDA FL 33950	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation VARIOUS SHIPPING COMPANIES 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) KEVIN O'DONNELL	Date of Receipt MM / DD / YYYY 04 / 19 / 2011
	Mailing Address 558 Reliance Avenue	<b>Transaction ID:</b> SA11AI.58518
	City State Zip Code HENDERSON NV 89015	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation MAERSK LINE LTD 1st Asst Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JAMES T O'LEARY	Date of Receipt MM / DD / YYYY 04 / 06 / 2011
	Mailing Address 34 HAMMEL AVE	<b>Transaction ID:</b> SA11AI.58418
	City State Zip Code ST LOUIS MO 63119	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation USS TRANSPORT, LLC FIRST ENGINEER TIER 1 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) .....	<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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 22  
(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)  
ROBERT PARK JR.

Mailing Address P.O. BOX 1127

City State Zip Code  
LAND O LAKES FL 34639

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 ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
04 / 27 / 2011

Transaction ID: SA11AI.58588

Amount of Each Receipt this Period  
100.00

**B.**

Full Name (Last, First, Middle Initial)  
PERRY PLUNKETT

Mailing Address 345 S Flower Ave

City State Zip Code  
Brea CA 92821

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

Name of Employer Occupation  
OCEAN SHIPS, INC. 2nd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
04 / 06 / 2011

Transaction ID: SA11AI.58422

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
VICTOR REWERTS

Mailing Address 500 W. FARRELL

City State Zip Code  
ABERDEEN WA 98520

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

Name of Employer Occupation  
OSPREY SHIP MGMT, INC. 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 28 / 2011

Transaction ID: SA11AI.58568

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **750.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 22  
(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)  
DOUGLAS ROGERS

Mailing Address 521 EAST 5TH STREET

City State Zip Code  
MONROE MI 48161

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

Name of Employer Occupation  
INTERLAKE LEASING III, IN-C. Steward

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 251.00

Date of Receipt

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

Transaction ID: SA11AI.58604

Amount of Each Receipt this Period

66.00

**B.**

Full Name (Last, First, Middle Initial)  
DAVID SANCHEZ-NAVARRO

Mailing Address P O BOX 218

City State Zip Code  
WALPOLE NH 03608

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

Name of Employer Occupation  
VICTORY MARITIME INC. Master

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

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

Transaction ID: SA11AI.58540

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
ANDREW L SWANSON

Mailing Address 316 CALIFORNIA AVENUE, #152

City State Zip Code  
RENO NV 89509

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

Name of Employer Occupation  
MAERSK LINE LTD

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

Date of Receipt

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

Transaction ID: SA11AI.58532

Amount of Each Receipt this Period

300.00

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

766.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 22
	<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) ANDREW L SWANSON		Date of Receipt
	Mailing Address 316 CALIFORNIA AVENUE, #152		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	RENO	NV	89509
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58557
Name of Employer MAERSK LINE LTD		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 450.00	<input type="text"/> 150.00

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL P TOMBOLILLO		Date of Receipt
	Mailing Address PO BOX 368009 PMB # 197-F		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	SAN DIEGO	CA	92136
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58454
Name of Employer CROWLEY LINER SERVICES		Occupation 3rd Asst Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 225.00	<input type="text"/> 125.00

<b>C.</b>	Full Name (Last, First, Middle Initial) TIMOTHY TRALONGO		Date of Receipt
	Mailing Address 1210 LORENE DRIVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	PASADENA	MD	21122
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.58498
Name of Employer MAERSK LINE LTD		Occupation Chief Engineer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/>
		<input type="text"/> 500.00	<input type="text"/> 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 475.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 22  
(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)  
THOMAS VANDERBILT

Mailing Address 1336 W. THELMA STREET

City State Zip Code  
PALM CITY FL 34990

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

Name of Employer Occupation  
MAERSK LINE LTD CHIEF ENGINEER STEAM

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 14 / 2011

Transaction ID: SA11AI.58478

Amount of Each Receipt this Period  
400.00

**B.** Full Name (Last, First, Middle Initial)  
CHRIS VON HOHENLEITEN

Mailing Address 75 INTREPID LANE

City State Zip Code  
JAMESTOWN RI 02835-1830

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

Name of Employer Occupation  
TRANSOCEANIC CABLE SHIP CO. CHIEF OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
MM / DD / YYYY  
04 / 29 / 2011

Transaction ID: SA11AI.58599

Amount of Each Receipt this Period  
200.00

**C.** Full Name (Last, First, Middle Initial)  
RICHARD WAEM

Mailing Address 20423 State Road 7 #381

City State Zip Code  
Boca Raton FL 33498

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  
MM / DD / YYYY  
04 / 15 / 2011

Transaction ID: SA11AI.58502

Amount of Each Receipt this Period  
200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **800.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) JEFFREY WRIGHT, II		Date of Receipt	
	Mailing Address 9866 ENTERPRISE LN. NW APT. F301		M M / D D / Y Y Y Y 0 4 / 2 6 / 2 0 1 1	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.58581
	SILVERDALE	WA	98383	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		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 ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	9101.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 22  
(check only one)

<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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)  
CARPER FOR SENATE

Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR

City State Zip Code  
NEW CASTLE DE 19720

FEC ID number of contributing federal political committee. **C** C00313494

Name of Employer Occupation

Receipt For: 2012  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1240.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 0 4 / 2 8 / 2 0 1 1

Transaction ID: SA16.58615

Amount of Each Receipt this Period  
1240.00

Refund of Contribution

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1240.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1240.00

**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 19 / 22

<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.	Full Name (Last, First, Middle Initial) <b>CITIZENS FOR JOHN OLVER FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58351
	Mailing Address PO BOX 819 PO BOX 819	Date of Disbursement MM / DD / YYYY 04 / 07 / 2011
	City AMHERST	State MA
	Zip Code 01004	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOHN WALTER OLVER	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: MA District: 01	

B.	Full Name (Last, First, Middle Initial) <b>CITIZENS TO ELECT RICK LARSEN</b>	<b>Transaction ID:</b> SB23.58352
	Mailing Address PO Box 326	Date of Disbursement MM / DD / YYYY 04 / 07 / 2011
	City Everett	State WA
	Zip Code 98206	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name RICK LARSEN	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: WA District: 02	

C.	Full Name (Last, First, Middle Initial) <b>CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE</b>	<b>Transaction ID:</b> SB23.58353
	Mailing Address PO BOX 1631	Date of Disbursement MM / DD / YYYY 04 / 07 / 2011
	City BALTIMORE	State MD
	Zip Code 21203	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name ELIJAH E CUMMINGS	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: MD District: 07	

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

4500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 22

<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.	Full Name (Last, First, Middle Initial) <b>DEMOCRATS WIN SEATS (DWS PAC)</b>	<b>Transaction ID:</b> SB23.58360
	Mailing Address 1071 TWIN BRANCH LN	Date of Disbursement 04 / 29 / 2011
	City WESTON State FL Zip Code 33326	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>DUNCAN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58354
	Mailing Address PO BOX 2646	Date of Disbursement 04 / 26 / 2011
	City KNOXVILLE State TN Zip Code 37901	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name <b>JOHN J REP. JR. DUNCAN</b>	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>GIBBS FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58363
	Mailing Address 6992 TR 466	Date of Disbursement 04 / 07 / 2011
	City LAKEVILLE State OH Zip Code 44638	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name <b>Robert Gibbs</b>	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6500.00</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)

<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.</b> Full Name (Last, First, Middle Initial) <b>KEEP NICK RAHALL IN CONGRESS COMMITTEE</b> Mailing Address P O BOX 64 City BECKLEY, State WV Zip Code 25802 Purpose of Disbursement Contribution Candidate Name NICK JOE J II RAHALL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 03 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.58355 Date of Disbursement 04 / 26 / 2011
	Amount of Each Disbursement this Period 2500.00

<b>B.</b> Full Name (Last, First, Middle Initial) <b>LATHAM FOR CONGRESS</b> Mailing Address P.O. Box 71 PO BOX 71 City Clarion State IA Zip Code 50525 Purpose of Disbursement Contribution Candidate Name THOMAS P. LATHAM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04 Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.58350 Date of Disbursement 04 / 07 / 2011
	Amount of Each Disbursement this Period 2500.00

<b>C.</b> Full Name (Last, First, Middle Initial) <b>LATOURETTE FOR CONGRESS</b> Mailing Address 320 KENARDEN DRIVE City HIGHLAND HGTS State OH Zip Code 44143 Purpose of Disbursement Contribution Candidate Name Steve Latourette Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.58356 Date of Disbursement 04 / 26 / 2011
	Amount of Each Disbursement this Period 1000.00

<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

A.	Full Name (Last, First, Middle Initial) <b>VOLUNTEERS FOR SHIMKUS</b>	<b>Transaction ID:</b> SB23.58357
	Mailing Address PO BOX 661	Date of Disbursement 04 / 26 / 2011
	City COLLINSVILLE State IL Zip Code 62234	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOHN M SHIMKUS	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: IL District: 19	

B.	Full Name (Last, First, Middle Initial) <b>WASSERMAN-SCHULTZ FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58358
	Mailing Address 1071 Twin Branch Ln	Date of Disbursement 04 / 26 / 2011
	City Weston State FL Zip Code 33326	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DEBBIE WASSERMAN SCHULTZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 20	

C.	Full Name (Last, First, Middle Initial) <b>WASSERMAN-SCHULTZ FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58359
	Mailing Address 1071 Twin Branch Ln	Date of Disbursement 04 / 26 / 2011
	City Weston State FL Zip Code 33326	Amount of Each Disbursement this Period 3000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DEBBIE WASSERMAN SCHULTZ	
	Office Sought: <input checked="" type="checkbox"/> House <input 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: FL District: 20	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>9000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>26000.00</b>