

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
2014 SEP -2 AM 11:44

Office Use Only  
FEC MAIL CENTER

12FE4M5

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines:

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

ADDRESS (number and street)

450 HARRISON STREET

Check if different than previously reported. (ACC)

SAN FRANCISCO

CA

94105

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 00011338

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 Year-End Report (YE)
- July 31 Mid-Year Report (Non-election Year Only) (MY)
- Termination Report (TER)

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

XX

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

XX

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

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 GUNNAR LUNDEBERG

Signature of Treasurer

*Gunnar Lundberg*

Date

MM / DD / YYYY

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

Office Use Only

FEC FORM 3X  
Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>		<input type="text" value="22,110.08"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="22,110.08"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="3,660.00"/>	<input type="text" value="25,770.08"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="25,770.08"/>	<input type="text" value="25,770.08"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="8,191.75"/>	<input type="text" value="8,191.74"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="17,578.33"/>	<input type="text" value="17,578.33"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0.00"/>	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

Report Covering the Period: From:

MM / DD / YYYY  
01 / 01 / 2014

To:

MM / DD / YYYY  
03 / 31 / 2014

**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).....

400.00

400.00

(ii) Unitemized.....

3,260.00

3,260.00

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

3,660.00

3,660.00

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

3,660.00

3,660.00

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

3,660.00

3,660.00

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

3,660.00

3,660.00

**DETAILED SUMMARY PAGE**  
of Disbursements

**II. Disbursements**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....	91.75	91.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	91.75	91.75
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6,000.00	6,000.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements .....	2,100.00	2,100.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8,191.75	8,191.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8,191.75	8,191.75

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**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

<b>III. Net Contributions/Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	3,660.00	3,660.00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	3,660.00	3,660.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....		
37. Offsets to Operating Expenditures (from Line 15, page 3).....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....		

110110011001

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

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

FOR LINE NUMBER: PAGE 1 OF 1  
 11a 13  11b 14  11c 15  12 16  17

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

NAME OF COMMITTEE (In Full)  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

Full Name (Last, First, Middle Initial)  
**A. O'BOYLE, MICHAEL**

Mailing Address  
**450 HARRISON ST**

City State Zip Code  
**SAN FRANCISCO CA 94105**

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

Name of Employer Occupation  
**AMERICAN PRES. LINES SEAMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

Date of Receipt  
**01 / 13 / 2014**

Amount of Each Receipt this Period  
**200.00**

Full Name (Last, First, Middle Initial)  
**B. WILLIAMSON, WILLIAM**

Mailing Address  
**31003 14TH AVE S APT G2**

City State Zip Code  
**FEDERAL WAY WA 98003**

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

Name of Employer Occupation  
**AMERICAN PRES LINES SEAMAN**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**200.00**

Date of Receipt  
**01 / 16 / 2014**

Amount of Each Receipt this Period  
**200.00**

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

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 ▼

Date of Receipt

Amount of Each Receipt this Period

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **400.00**

**TOTAL** This Period (last page this line number only) ..... ▶ **400.00**

1101100112413

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

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

Full Name (Last, First, Middle Initial)

<b>A.</b>		Date of Disbursement	
CONNIE LEYVA FOR SENATE		MM / DD / YYYY 03 / 12 / 2014	
Mailing Address 777 S. FIGUEROA STREET, SUITE 4050			
City	State	Zip Code	
LOS ANGELES	CA	90017-5864	
Purpose of Disbursement		Amount of Each Disbursement this Period	
		Category/Type: 011 500.00	
Candidate Name	Disbursement For:		
CONNIE LEYVA	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Office Sought:	Other (specify) ▼		
<input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President			
State: District:			

<b>B.</b>		Date of Disbursement	
MIKE HONDA FOR CONGRESS		MM / DD / YYYY 03 / 05 / 2014	
Mailing Address 625 3RD STREET, NE SUITE #2			
City	State	Zip Code	
WASHINGTON	WA	20002	
Purpose of Disbursement		Amount of Each Disbursement this Period	
		Category/Type: 011 1,000.00	
Candidate Name	Disbursement For:		
MIKE HONDA	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Office Sought:	Other (specify) ▼		
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: WV CA District: 17TH			

<b>C.</b>		Date of Disbursement	
JANICE HAHN FOR CONGRESS		MM / DD / YYYY 03 / 28 / 2014	
Mailing Address 1379 PARK WESTERN DRIVE #142			
City	State	Zip Code	
SAN PEDRO	CA	90732	
Purpose of Disbursement		Amount of Each Disbursement this Period	
		Category/Type: 1,000.00	
Candidate Name	Disbursement For:		
JANICE HAHN	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General		
Office Sought:	Other (specify) ▼		
<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President			
State: CA District: 44TH			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	2,500.00
<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)  
SAILORS' UNION OF THE PACIFIC POLITICAL FUND

Full Name (Last, First, Middle Initial) A. TTD - PAC		Date of Disbursement MM / DD / YYYY 02 / 04 / 2014	
Mailing Address 815 16TH STREET, N.W., 4TH FLOOR		Amount of Each Disbursement this Period 2,500.00	
City WASHINGTON	State D.C.	Zip Code 20006	Category/ Type 011
Purpose of Disbursement		Candidate Name RAISE POLITICAL ACTION FUNDS	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B.		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WV District:			

Full Name (Last, First, Middle Initial) C.		Date of Disbursement MM / DD / YYYY	
Mailing Address		Amount of Each Disbursement this Period	
City	State	Zip Code	Category/ Type
Purpose of Disbursement		Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....	2,500.00
<b>TOTAL</b> This Period (last page this line number only).....	6,000.00

UPDOWN - FUND - LINE#



**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 1 OF 1

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

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

NAME OF COMMITTEE (In Full)

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

Full Name (Last, First, Middle Initial)

<p><b>A.</b> UNITY PAC</p> <p>Mailing Address 100 HEGENBERGER RD, SUITE 150</p> <p>City OAKLAND State CA Zip Code 94621</p> <p>Purpose of Disbursement</p> <p>Candidate Name RAISE POLITICAL ACTION FUNDS</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2014</p> <p>Amount of Each Disbursement this Period 1,600.00</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type 011</p>		

<p><b>B.</b> ALASKA FOR BEGICH</p> <p>Mailing Address PO BOX 410</p> <p>City PALMER State AK Zip Code 99645</p> <p>Purpose of Disbursement</p> <p>Candidate Name MARK BEGICH</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:</p>		<p>Date of Disbursement MM / DD / YYYY 03 / 05 / 2014</p> <p>Amount of Each Disbursement this Period 1,500.00</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type 011</p>		

<p><b>C.</b></p> <p>Mailing Address</p> <p>City State Zip Code</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p>Date of Disbursement MM / DD / YYYY</p> <p>Amount of Each Disbursement this Period</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Category/Type</p>		

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

2,100.00

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

2,100.00

14001100110001

SAILORS' UNION OF THE PACIFIC  
450 HARRISON ST., RM 108  
SAN FRANCISCO, CA 94105

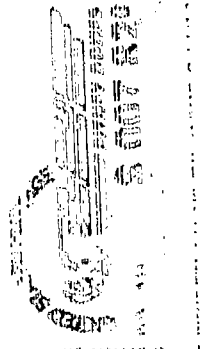
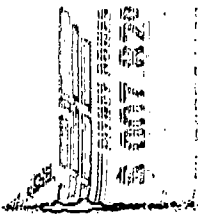
S

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT  
OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

**CERTIFIED MAIL™**



7014 0510 0002 3661 6468



FEDERAL ELECTION COMMISSION  
999 E STREET, NW  
WASHINGTON, DC 20463

RECEIVED  
2814 SEP - 2 AM 11:44  
REC MAIL CENTER

Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

*ASLP*  
 PREPARER  
 (8/2013)

*9/2/14*  
 DATE PREPARED

FRONT PAGE