



**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**American Maritime Officers Voluntary Political Action 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="2012"/>		83209.09
(b) Cash on Hand at Beginning of Reporting Period.....	83209.09	
(c) Total Receipts (from Line 19) .....	44846.26	44846.26
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	128055.35	128055.35
7. Total Disbursements (from Line 31).....	23750.00	23750.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	104305.35	104305.35
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:  /  /  To:  /  /

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).....	17765.00	17765.00
(ii) Unitemized .....	27081.00	27081.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	44846.00	44846.00
(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) .....	44846.00	44846.00
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.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.26	0.26
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 Transfers (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))..... ▶	44846.26	44846.26
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	44846.26	44846.26

**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 .....	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.....	23500.00	23500.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	250.00	250.00
(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)).....	250.00	250.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	23750.00	23750.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	23750.00	23750.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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) .....	44846.00	44846.00
34. Total Contribution Refunds (from Line 28(d)) .....	250.00	250.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	44596.00	44596.00
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: PAGE 6 OF 28  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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

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

**A. NICHOLAS ANTHONY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 774  
 City CANADENSIS State PA Zip Code 18325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAERSK LINE LTD Occupation 1st Asst Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 348.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 10 / 2012  
**Transaction ID : SA11AI.61804**  
 Amount of Each Receipt this Period  
 348.00

**B. NICHOLAS ANTHONY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 774  
 City CANADENSIS State PA Zip Code 18325  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAERSK LINE LTD Occupation 1st Asst Engineer  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 448.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2012  
**Transaction ID : SA11AI.61951**  
 Amount of Each Receipt this Period  
 100.00

**C. JOHN BARNETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P O BOX 780  
 City UTOPIA State TX Zip Code 78884  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAERSK LINE LTD Occupation Master  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012  
**Transaction ID : SA11AI.61900**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 748.00  
**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 7 OF 28
	<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. CHRIS BARTLETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 158 PAINE AVE. EXT.

City MORRISVILLE State VT Zip Code 05661

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

Name of Employer RED RIVER HOLDINGS Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 11 / 2012  
**Transaction ID : SA11AI.61812**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 416 NW DOVER CT.

City PORT ST. LUCIE State FL Zip Code 34983

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

Name of Employer MAERSK LINE LTD Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 03 / 2012  
**Transaction ID : SA11AI.61710**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 20 CRESTWOOD DR.

City KINGSTON State RI Zip Code 02881

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

Name of Employer AMERICAN OVERSEAS MARINE CORP Occupation CHIEF ENGINEER DIESEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 10 / 2012  
**Transaction ID : SA11AI.61787**

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

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

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

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

FOR LINE NUMBER: PAGE 8 OF 28  
(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. THOMAS CABAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 102-14 163RD. DR.  
 City HOWARD BEACH State NY Zip Code 11414  
 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 ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 26 / 2012  
**Transaction ID : SA11AI.62070**  
 Amount of Each Receipt this Period  
 500.00

**B. JAMES CHEDISTER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1426 HARVARD AVE. #244  
 City SEATTLE State WA Zip Code 98122  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer MAERSK LINE LTD Occupation 2nd Mate  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 17 / 2012  
**Transaction ID : SA11AI.61892**  
 Amount of Each Receipt this Period  
 250.00

**C. KRUGER DONALD**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2670 BOTTOMRIDGE DR  
 City ORANGE PARK State FL Zip Code 32065  
 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 Y  
 01 / 10 / 2012  
**Transaction ID : SA11AI.61795**  
 Amount of Each Receipt this Period  
 250.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 9 OF 28
<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. SEAN DONOVAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 13 / 2012 <b>Transaction ID : SA11AI.61886</b>
Mailing Address 72 KERR ST.		Amount of Each Receipt this Period 350.00
City ONANCOCK	State VA	Zip Code 23417
FEC ID number of contributing federal political committee. C		
Name of Employer USS TRANSPORT, LLC	Occupation 3rd Asst Engineer	
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>B. SEAN DONOVAN</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 20 / 2012 <b>Transaction ID : SA11AI.61992</b>
Mailing Address 72 KERR ST.		Amount of Each Receipt this Period 150.00
City ONANCOCK	State VA	Zip Code 23417
FEC ID number of contributing federal political committee. C		
Name of Employer USS TRANSPORT, LLC	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. DAVID EDDY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 17 / 2012 <b>Transaction ID : SA11AI.61894</b>
Mailing Address 275 POMEROY LANE		Amount of Each Receipt this Period 400.00
City AMHERST	State MA	Zip Code 01002
FEC ID number of contributing federal political committee. C		
Name of Employer AMERICAN OVERSEAS MARINE	Occupation Chief Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	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 10 OF 28
<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. MARK EMOND**  
Full Name (Last, First, Middle Initial)

Mailing Address N 12628 BOYDS ROAD  
P.O. BOX 195

City State Zip Code  
PARK FALLS WI 54552

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

Name of Employer Occupation  
OGLEBAY NORTON COMPANY 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
258.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 24 / 2012  
**Transaction ID : SA11AI.62043**

Amount of Each Receipt this Period  
258.00

**B. ALAN ESLICK**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 73

City State Zip Code  
WILDWOOD FL 34785

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 03 / 2012  
**Transaction ID : SA11AI.61716**

Amount of Each Receipt this Period  
400.00

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

Mailing Address 5242 KAREN CT.

City State Zip Code  
MISSOULA MT 59803

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
01 / 18 / 2012  
**Transaction ID : SA11AI.61933**

Amount of Each Receipt this Period  
400.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1058.00
<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 11 OF 28
	<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	<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. CORNELIUS GLEASON</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 17 / 2012 <b>Transaction ID : SA11AI.61907</b>
Mailing Address 1069 QUAIN LANE			Amount of Each Receipt this Period 225.00
City PORT HURON TOWNSHI	State MI	Zip Code 48060	
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN STEAMSHIP CO.	Occupation 2nd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>B. DAVID HAGNER</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 19 / 2012 <b>Transaction ID : SA11AI.61949</b>
Mailing Address 57 GREAT BAY DR W.			Amount of Each Receipt this Period 400.00
City GREENLAND	State NH	Zip Code 03840	
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN OVERSEAS MARINE	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. CHRISTOPHER HILL</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 27 / 2012 <b>Transaction ID : SA11AI.62096</b>
Mailing Address P.O. BOX 266			Amount of Each Receipt this Period 400.00
City RABUN GAP	State GA	Zip Code 30568	
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1025.00
<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 12 OF 28  
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**American Maritime Officers Voluntary Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. ROMAN JARMULA**

Mailing Address 1800 EAGLE TRACE BW

City PALM HARBOR	State FL	Zip Code 34685
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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 ▼  
300.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	16	/	2012

**Transaction ID : SA11Al.61887**

Amount of Each Receipt this Period  
300.00

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

Mailing Address 634 IANA ST.

City KAILUA	State HI	Zip Code 96734
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FEC ID number of contributing federal political committee. **C**

Name of Employer MAERSK LINE LTD	Occupation 2nd Mate
-------------------------------------	------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
01	/	12	/	2012

**Transaction ID : SA11Al.61838**

Amount of Each Receipt this Period  
250.00

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

Mailing Address 7423 CAMEO ST

City NEW ORLEANS	State LA	Zip Code 70124
---------------------	-------------	-------------------

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
01	/	27	/	2012

**Transaction ID : SA11Al.62082**

Amount of Each Receipt this Period  
250.00

<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) for each category of the Detailed Summary Page

FOR LINE NUMBER: PAGE 13 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. PAUL KRAUSE**  
 Mailing Address 6517 ELGIN LANE  
 City State Zip Code  
 BETHESDA MD 20817  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Various Shipping Companies Merchant Marine Officer  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 20 / 2012  
**Transaction ID : SA11AI.61993**  
 Amount of Each Receipt this Period  
 400.00

Full Name (Last, First, Middle Initial)  
**B. JOZEF KUBICA**  
 Mailing Address 3935 PEPPERMILL LANE  
 City State Zip Code  
 BAY CITY MI 48706  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 OGLEBAY NORTON COMPANY 2nd Asst Engineer  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 26 / 2012  
**Transaction ID : SA11AI.62075**  
 Amount of Each Receipt this Period  
 300.00

Full Name (Last, First, Middle Initial)  
**C. TODD L'ITALIEN**  
 Mailing Address 60 RANTOUL ST.  
 #114  
 City State Zip Code  
 BEVERLY MA 01915  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 INTEROCEAN UGLAND MGMT CORP. CHIEF OFFICER  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 03 / 2012  
**Transaction ID : SA11AI.61706**  
 Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1000.00  
**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 14 OF 28
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<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 LENTOWICH</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 09 / 2012 <b>Transaction ID : SA11Al.61773</b>
Mailing Address 1115 11TH AVE		Amount of Each Receipt this Period 250.00
City HOUGHTON	State MI	Zip Code 49931
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 250.00
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 ▼ 250.00	

Full Name (Last, First, Middle Initial) <b>B. MARK LEWEDAG</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 06 / 2012 <b>Transaction ID : SA11Al.61752</b>
Mailing Address 3823 ESTEAPONIA AVE		Amount of Each Receipt this Period 400.00
City MIAMI	State FL	Zip Code 33178
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. ADAM LOWRY</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 10 / 2012 <b>Transaction ID : SA11Al.61788</b>
Mailing Address 710 AUGUSTA CIRC.		Amount of Each Receipt this Period 400.00
City ST. AUGUSTINE	State FL	Zip Code 32086
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 400.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1050.00
<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 15 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. SCOTT LUND**

Mailing Address 6 LINSCOTT RD

City State Zip Code  
 JEFFERSON ME 04348

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

Name of Employer Occupation  
 PACIFIC GULF MARINE, INC. SECOND MATE

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 17 / 2012  
**Transaction ID : SA11AI.61889**

Amount of Each Receipt this Period  
 400.00

Full Name (Last, First, Middle Initial)  
**B. THOMAS MADDEN**

Mailing Address 15 DOUGLAS DR

City State Zip Code  
 N EASTON MA 02356

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 ▼  
 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 11 / 2012  
**Transaction ID : SA11AI.61814**

Amount of Each Receipt this Period  
 300.00

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

Mailing Address 1925 SEMINOLE ROAD

City State Zip Code  
 ATLANTIC BEACH FL 32233

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

Name of Employer Occupation  
 AMERICAN OVERSEAS MARINE Master

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 09 / 2012  
**Transaction ID : SA11AI.61772**

Amount of Each Receipt this Period  
 500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 28  
(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. KEVIN MURPHY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 131 RIVER RD  
 City BOOTHBAY State ME Zip Code 04537  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 20 / 2012  
**Transaction ID : SA11AI.61988**  
 Amount of Each Receipt this Period  
 400.00

**B. HENRI NAEGER JR.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5256 BAGPIPERS LANE  
 City VIRGINIA BEACH State VA Zip Code 23464  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2012  
**Transaction ID : SA11AI.61826**  
 Amount of Each Receipt this Period  
 500.00

**C. KEVIN P O DONNELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 850 S. BOULDER HIGHWAY, SUITE 296  
 City HENDERSON State NV Zip Code 89015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer OCEAN SHIPS, INC. Occupation MERCHANT MARINE OFFICER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2012  
**Transaction ID : SA11AI.61820**  
 Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1300.00  
**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 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. DANIEL R PAGE**

Mailing Address 7 WHITNEY WAY

City State Zip Code  
 RAYMOND ME 04071

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

Name of Employer Occupation  
 AMERICAN OVERSEAS MARINE Chief Mate

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 19 / 2012  
**Transaction ID : SA11AI.61966**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**B. MARC PARENTEAU**

Mailing Address 413 CLARKS WOODS RD

City State Zip Code  
 LYMAN ME 04002

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

Name of Employer Occupation  
 VARIOUS SHIPPING COMPANIES MERCHANT MARINE OFFICER

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 24 / 2012  
**Transaction ID : SA11AI.62033**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 563 CRESS STREET

City State Zip Code  
 LAGUNA BEACH CA 92651

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 ▼  
 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 18 / 2012  
**Transaction ID : SA11AI.61935**

Amount of Each Receipt this Period  
 300.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1200.00

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

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

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

FOR LINE NUMBER: PAGE 18 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. 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  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 19 / 2012  
**Transaction ID : SA11AI.61944**

Amount of Each Receipt this Period  
 250.00

Full Name (Last, First, Middle Initial)  
**B. DONALD RUMNEY**

Mailing Address 49 POND STREET  
 BOX 1485

City State Zip Code  
 BUCKSPORT ME 04416

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

Name of Employer Occupation  
 Various Shipping Companies Merchant Marine Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 25 / 2012  
**Transaction ID : SA11AI.62053**

Amount of Each Receipt this Period  
 400.00

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

Mailing Address 231 POPLAR DR.  
 510-749-8452

City State Zip Code  
 KENTFIELD CA 94904

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

Name of Employer Occupation  
 PACIFIC GULF MARINE INC. Master

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 01 / 27 / 2012  
**Transaction ID : SA11AI.62097**

Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1050.00

**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 19 OF 28
<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. MARK SLADEN</b>		Date of Receipt MM / DD / YYYY 01 / 09 / 2012 <b>Transaction ID : SA11AI.61765</b>
Mailing Address 267 SEASIDE AVE.		Amount of Each Receipt this Period 400.00
City SACO	State ME	Zip Code 04072
FEC ID number of contributing federal political committee. C		
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. KARL SMITH</b>		Date of Receipt MM / DD / YYYY 01 / 19 / 2012 <b>Transaction ID : SA11AI.61980</b>
Mailing Address 589 VANDEVER RD		Amount of Each Receipt this Period 234.00
City CROSSVILLE	State TN	Zip Code 38555
FEC ID number of contributing federal political committee. C		
Name of Employer KEY LAKES, INC.	Occupation 2nd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

Full Name (Last, First, Middle Initial) <b>C. THOMAS SPAIN</b>		Date of Receipt MM / DD / YYYY 01 / 03 / 2012 <b>Transaction ID : SA11AI.61718</b>
Mailing Address 211 KAY AVE		Amount of Each Receipt this Period 700.00
City SALISBURY	State MD	Zip Code 21804
FEC ID number of contributing federal political committee. C		
Name of Employer MAERSK LINE LTD	Occupation 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1334.00
<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 20 OF 28  
(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**

Full Name (Last, First, Middle Initial)  
**A. THOMAS SPAIN**

Mailing Address 211 KAY AVE

City State Zip Code  
 SALISBURY MD 21804

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

Name of Employer Occupation  
 MAERSK LINE LTD 3rd Mate

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 1200.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 12 / 2012  
**Transaction ID : SA11AI.61839**

Amount of Each Receipt this Period  
 500.00

Full Name (Last, First, Middle Initial)  
**B. DERIK STUBINSKI**

Mailing Address 4 TALL PINES DR.

City State Zip Code  
 SACO ME 04072

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

Name of Employer Occupation  
 AMERICAN OVERSEAS MARINE CORP 3RD ENGINEER STEAM

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 250.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 11 / 2012  
**Transaction ID : SA11AI.61811**

Amount of Each Receipt this Period  
 250.00

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

Mailing Address 1212 Edgebrook Drive

City State Zip Code  
 Modesto CA 95354-1535

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

Name of Employer Occupation  
 Various Shipping Companies Merchant Marine Officer

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 09 / 2012  
**Transaction ID : SA11AI.61779**

Amount of Each Receipt this Period  
 400.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1150.00

**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 21 OF 28
<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. RYAN WALL</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 12 / 2012 <b>Transaction ID : SA11AI.61836</b>
Mailing Address 524 THICKET STREET		Amount of Each Receipt this Period 500.00
City WEYMOUTH	State MA	Zip Code 02190
FEC ID number of contributing federal political committee. C	Name of Employer AMERICAN OVERSEAS MARINE	Occupation 3rd Asst Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. MATTHEW B WHEELER</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 23 / 2012 <b>Transaction ID : SA11AI.62010</b>
Mailing Address PO BOX 366		Amount of Each Receipt this Period 400.00
City WELLS	State ME	Zip Code 04090
FEC ID number of contributing federal political committee. C	Name of Employer OSPREY SHIP MGMT, INC.	Occupation 3rd Asst Engineer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. EDWARD G WILKINS</b>		Date of Receipt M M / D D / Y Y Y Y Y Y 01 / 03 / 2012 <b>Transaction ID : SA11AI.61709</b>
Mailing Address 119 FIELD STREET		Amount of Each Receipt this Period 500.00
City PENNS GROVE	State NJ	Zip Code 08069
FEC ID number of contributing federal political committee. C	Name of Employer CROWLEY LINER SERVICES	Occupation Merchant Marine Officer
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1400.00
<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 22 OF 28
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 12
	<input type="checkbox"/> 16
	<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
**JOSEPH WILLIS**

Mailing Address 512 LAURA LANE

City GRAND PRAIRIE	State TX	Zip Code 75052
-----------------------	-------------	-------------------

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

Name of Employer MAERSK LINE LTD	Occupation 2nd Asst Engineer
-------------------------------------	---------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 01 / 03 / 2012

**Transaction ID : SA11AL61717**

Amount of Each Receipt this Period  
500.00

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

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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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  
 M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	17765.00

**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)

<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. BETTY SUTTON FOR CONGRESS**

Mailing Address PO BOX 14693

City State Zip Code  
COPLEY OH 44321

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**BETTY S MS. SUTTON**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: OH District: 13

Date of Disbursement

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

**Transaction ID : SB23.61696**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. CARPER FOR SENATE**

Mailing Address 19 EAST COMMONS BLVD SECOND FLOOR

City State Zip Code  
NEW CASTLE DE 19720

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**THOMAS R CARPER**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: DE District: 00

Date of Disbursement

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

**Transaction ID : SB23.61672**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO RE-ELECT LINDA SANCHEZ**

Mailing Address 1212 S. Victory Blvd  
SUITE 211

City State Zip Code  
BURBANK CA 91502

Purpose of Disbursement  
Contribution

Candidate Name  
**LINDA SANCHEZ**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: CA District: 39

Date of Disbursement

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

**Transaction ID : SB23.61665**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

6	5	0	0	.	0	0
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6	5	0	0	.	0	0
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**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)

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

Mailing Address 601 S GLENOAKS BLVD., #208

City State Zip Code  
BURBANK CA 91502

Purpose of Disbursement  
Void Check Returned Never cashed

Candidate Name  
**LORETTA SANCHEZ**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: CA District: 47

Date of Disbursement

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

**Transaction ID : SB23.61697**

Amount of Each Disbursement this Period

-	2	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**B. DUNCAN FOR CONGRESS**

Mailing Address PO BOX 2646

City State Zip Code  
KNOXVILLE TN 37901

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**JOHN J REP. JR. DUNCAN**

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: TN District: 02

Date of Disbursement

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

**Transaction ID : SB23.61673**

Amount of Each Disbursement this Period

1	0	0	0	0	0	0	0	0	0
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Full Name (Last, First, Middle Initial)

**C. FREEDOM PROJECT; THE**

Mailing Address 509 7th Street NW  
Third Floor

City State Zip Code  
Washington DC 20004

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For: 2012  Primary  General  Other (specify) ▼  
State: District:

Date of Disbursement

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

**Transaction ID : SB23.61692**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4	0	0	0	0	0	0	0	0	0
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4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---



**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)

**A. KEN CALVERT FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 20123

City RIVERSIDE State CA Zip Code 92516

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KEN CALVERT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

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

**Transaction ID : SB23.61668**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
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Full Name (Last, First, Middle Initial)

**B. KEN CALVERT FOR CONGRESS COMMITTEE**

Mailing Address PO Box 20123

City Riverside State CA Zip Code 92516

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KEN CALVERT**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 44

Date of Disbursement

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

**Transaction ID : SB23.61670**

Amount of Each Disbursement this Period

5	0	0	.	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. LATOURETTE FOR CONGRESS COMMITTEE**

Mailing Address 320 KENARDEN DR

City HIGHLAND HTS State OH Zip Code 44143

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**STEVEN C LATOURETTE**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 14

Date of Disbursement

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

**Transaction ID : SB23.61682**

Amount of Each Disbursement this Period

2	5	0	0	.	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

4	5	0	0	.	0	0
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4	5	0	0	.	0	0
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**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)

**A. LEE TERRY FOR CONGRESS**

Mailing Address PO Box 540098

City Omaha State NE Zip Code 68154

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**LEE TERRY**

Office Sought:  House  
 Senate  
 President  
State: NE District: 02

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 11 / 2012

**Transaction ID : SB23.61671**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. MARCIA FUDGE FOR CONGRESS**

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
**MARCIA L FUDGE**

Office Sought:  House  
 Senate  
 President  
State: OH District: 11

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
01 / 25 / 2012

**Transaction ID : SB23.61693**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

3000.00

23500.00

# 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)

<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. GEORGE BERTHOLET**

Mailing Address 20 CRESTWOOD DR.

City KINGSTON State RI Zip Code 02881

Purpose of Disbursement  
Refund Contribution

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB28A.61698

Amount of Each Disbursement this Period

2	5	0	0	.	0	0					
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**B.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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**C.**

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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

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

2	5	0	0	.	0	0					
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2	5	0	0	.	0	0					
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