

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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

ADDRESS (number and street) 1501 BROADWAY SUITE 600
PARAMOUNT BUILDING
 Check if different than previously reported. (ACC)
NEW YORK NY 10036

2. **FEC IDENTIFICATION NUMBER** C00073627
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 07 01 2009 through 12 31 2009

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 Mr. SAM FOLIO

Signature of Treasurer Electronically Filed by Mr. SAM FOLIO Date 02 01 2010

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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		9074.93
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	5609.99									
(c) Total Receipts (from Line 19)	9088.62	29934.22								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	14698.61	39009.15								
7. Total Disbursements (from Line 31)	10183.82	34494.36								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4514.79	4514.79								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

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)	308.00	308.00
(ii) Unitemized	8780.62	29626.22
(iii) TOTAL (add Lines 11(a)(i) and (ii)	9088.62	29934.22
(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)	9088.62	29934.22
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.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	9088.62	29934.22
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	9088.62	29934.22

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	1638.82	1949.36
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	1638.82	1949.36
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	8500.00	32500.00
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	45.00	45.00
(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))	45.00	45.00
29. Other Disbursements.....	0.00	0.00
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))..	10183.82	34494.36
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10183.82	34494.36

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	9088.62	29934.22
34. Total Contribution Refunds (from Line 28(d))	45.00	45.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9043.62	29889.22
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1638.82	1949.36
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1638.82	1949.36

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

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

FOR LINE NUMBER: PAGE 6 / 13
(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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A. Full Name (Last, First, Middle Initial)
Mr. SAM FOLIO

Mailing Address **1501 BROADWAY
SUITE 600**

City **NEW YORK** State **NY** Zip Code **10036**

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

Name of Employer **AMERICAN FEDERATION OF MUSICIA** Occupation **TREASURER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2009

Transaction ID: SA11AI.42481

Amount of Each Receipt this Period
20.00

[MEMO ITEM]

B. Full Name (Last, First, Middle Initial)
MS RACHEL GOLDSTEIN

Mailing Address **1414 N. WELLS STREET,
#308**

City **CHICAGO** State **IL** Zip Code **60610**

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

Name of Employer **local 10-208** Occupation **MUSICIAN**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **238.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2009

Transaction ID: SA11AI.42424

Amount of Each Receipt this Period
188.00

C. Full Name (Last, First, Middle Initial)
GARY MATTS

Mailing Address **2449 MARLBOROUGH**

City **DARIEN** State **IL** Zip Code **60561**

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

Name of Employer **CHICAGO FED. OF MUSICIANS** Occupation **OFFICE EMPLOYEE**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 03 / 2009

Transaction ID: SA11AI.42474

Amount of Each Receipt this Period
20.00

SUBTOTAL of Receipts This Page (optional) ► **208.00**

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 7 / 13	
	(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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A.	Full Name (Last, First, Middle Initial) MS CATHERINE PAYNE		Date of Receipt																					
	Mailing Address 751-23RD AVENUE		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	9
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		0	3		2	0	0	9														
	City	State	Zip Code	Transaction ID: SA11AI.42458																				
SAN FRANCISCO	CA	94121	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.	C		100.00																					
Name of Employer	Occupation																							
Receipt For:	Aggregate Year-to-Date ▼																							
<input type="checkbox"/> Primary <input type="checkbox"/> General	275.00																							
<input type="checkbox"/> Other (specify) ▼																								

SUBTOTAL of Receipts This Page (optional)	▶	100.00
TOTAL This Period (last page this line number only)	▶	308.00

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A. OPTIMAL PAYMENTS(MONERIS)

Full Name (Last, First, Middle Initial)

OPTIMAL PAYMENTS(MONERIS)

Mailing Address P.O. BOX 6600

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.43017

Date of Disbursement

07 / 31 / 2009

Amount of Each Disbursement this Period

44.95

B. OPTIMAL PAYMENTS(MONERIS)

Full Name (Last, First, Middle Initial)

OPTIMAL PAYMENTS(MONERIS)

Mailing Address P.O. BOX 6600

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.43018

Date of Disbursement

08 / 31 / 2009

Amount of Each Disbursement this Period

44.95

C. OPTIMAL PAYMENTS(MONERIS)

Full Name (Last, First, Middle Initial)

OPTIMAL PAYMENTS(MONERIS)

Mailing Address P.O. BOX 6600

City HAGERSTOWN State MD Zip Code 21740

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.43019

Date of Disbursement

09 / 30 / 2009

Amount of Each Disbursement this Period

44.97

SUBTOTAL of Disbursements This Page (optional) ▶

134.87

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A.	Full Name (Last, First, Middle Initial) OPTIMAL PAYMENTS(MONERIS) <hr/> Mailing Address P.O. BOX 6600 <hr/> City HAGERSTOWN State MD Zip Code 21740 <hr/> Purpose of Disbursement <input type="text"/> Category/Type <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB21B.43020 Date of Disbursement 10 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 44.95
B.	Full Name (Last, First, Middle Initial) OPTIMAL PAYMENTS(MONERIS) <hr/> Mailing Address P.O. BOX 6600 <hr/> City HAGERSTOWN State MD Zip Code 21740 <hr/> Purpose of Disbursement <input type="text"/> Category/Type <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB21B.43021 Date of Disbursement 11 / 30 / 2009 <hr/> Amount of Each Disbursement this Period 44.95
C.	Full Name (Last, First, Middle Initial) OPTIMAL PAYMENTS(MONERIS) <hr/> Mailing Address P.O. BOX 6600 <hr/> City HAGERSTOWN State MD Zip Code 21740 <hr/> Purpose of Disbursement <input type="text"/> Category/Type <hr/> Candidate Name <input type="text"/> Category/Type <hr/> 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:	Transaction ID: SB21B.43022 Date of Disbursement 12 / 31 / 2009 <hr/> Amount of Each Disbursement this Period 45.05

SUBTOTAL of Disbursements This Page (optional)	134.95
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 10 / 13

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A.	Full Name (Last, First, Middle Initial) PREMIER PROMOTIONAL GROUP LLC	Transaction ID: SB21B.43001
	Mailing Address 1647 HEADLAND DRIVE	Date of Disbursement 07 / 16 / 2009
	City ST. LOUIS State MO Zip Code 63026	Amount of Each Disbursement this Period 684.50
	Purpose of Disbursement Purchased merchandize for resale-fundraiser	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) PREMIER PROMOTIONAL GROUP LLC	Transaction ID: SB21B.43016
	Mailing Address 1647 HEADLAND DRIVE	Date of Disbursement 09 / 03 / 2009
	City ST. LOUIS State MO Zip Code 63026	Amount of Each Disbursement this Period 684.50
	Purpose of Disbursement mERCHANDIZED FOR RESALE-FUND RAISER	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

1369.00

TOTAL This Period (last page this line number only)

1638.82

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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A.

Full Name (Last, First, Middle Initial)
BERMAN FOR CONGRESS

Transaction ID: SB23.43006
Date of Disbursement

Mailing Address 6380 Wilshire Blvd. #1612

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	9

City State Zip Code
Los Angeles CA 90048

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: CA District: 28

B.

Full Name (Last, First, Middle Initial)
COHEN, STEPHEN IRA

Transaction ID: SB23.43008
Date of Disbursement

Mailing Address 349 KENILWORTH

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	9

City State Zip Code
MEMPHIS TN 38112

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
CONYERS FOR CONGRESS

Transaction ID: SB23.43010
Date of Disbursement

Mailing Address 1031 N EDGEWOOD STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	9

City State Zip Code
ARLINGTON VA 22201

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: MI District: 14

SUBTOTAL of Disbursements This Page (optional)

3000.00

TOTAL This Period (last page this line number only)

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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)

PAGE 12 / 13

<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 FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A. Full Name (Last, First, Middle Initial)
FRIENDS OF CONGRESSMAN GEORGE MILLER

Mailing Address P.O. Box 5864

City State Zip Code
Concord CA 94524

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: CA District: 07
Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: SB23.43013

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRIENDS OF ROSA DELAURO

Mailing Address 49 HUNTINGTON STREET

City State Zip Code
NEW HAVEN CT 06511

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: CT District: 03
Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: SB23.43011

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
MARSHA BLACKBURN FOR CONGRESS INC.

Mailing Address PO Box 682185

City State Zip Code
Franklin TN 37068

Purpose of Disbursement

Candidate Name

Category/
Type

Office Sought: House Senate President
State: TN District: 07
Disbursement For: 2009
 Primary General
 Other (specify) ▼

Transaction ID: SB23.43007

Date of Disbursement

07 / 16 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

2000.00

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)

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

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NAME OF COMMITTEE (In Full)

AMERICAN FEDERATION OF MUSICIANS OF THE UNITED STATES AND CANADA - LEGISLATIVE ACTION FU

A. Full Name (Last, First, Middle Initial) PAUL HODES FOR CONGRESS <hr/> Mailing Address 26 So. Main St. <hr/> City Concord State NH Zip Code 03301 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 02 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.43012 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) SENSENBRENNER COMMITTEE <hr/> Mailing Address PO BOX 575 <hr/> City BROOKFIELD State WI Zip Code 53008 <hr/> Purpose of Disbursement <hr/> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 05 Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.43003 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

8500.00