

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
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 5360 LEGACY DRIVE
 Check if different than previously reported. (ACC)
PLANO TX 75024

2. **FEC IDENTIFICATION NUMBER** C00313312
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)
CITY STATE ZIPCODE

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 2008 through 09 30 2008

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 Catherine L Shipp

Signature of Treasurer Electronically Filed by Catherine L Shipp Date 10 14 2008

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**

Write or Type Committee Name
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		66961.99
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	85631.04									
(c) Total Receipts (from Line 19)	5979.40	45148.45								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	91610.44	112110.44								
7. Total Disbursements (from Line 31)	62300.00	82800.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	29310.44	29310.44								
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**

Write or Type Committee Name
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	5305.23	39577.67
(i) Itemized (use Schedule A)		
(ii) Unitemized	674.17	5570.78
(iii) TOTAL (add Lines 11(a)(i) and (ii)	5979.40	45148.45
(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)	5979.40	45148.45
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))	5979.40	45148.45
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	5979.40	45148.45

DETAILED SUMMARY PAGE
of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	62300.00	82800.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	0.00	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))..	62300.00	82800.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62300.00	82800.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	5979.40	45148.45
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5979.40	45148.45
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 69
	<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	

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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Danny Anderson		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2 Suite 100		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6293
Name of Employer Safety-Kleen		Occupation VP Sourcing Procurement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="300.00"/>	Contribution

B.	Full Name (Last, First, Middle Initial) Danny Anderson		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2 Suite 100		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6336
Name of Employer Safety-Kleen		Occupation VP Sourcing Procurement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="330.00"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Danny Anderson		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2 Suite 100		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6372
Name of Employer Safety-Kleen		Occupation VP Sourcing Procurement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
		<input type="text" value="360.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="90.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Danny Anderson</p> <p>Mailing Address 5360 Legacy Drive Building 2 Suite 100</p> <p>City State Zip Code Plano TX 75024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Safety-Kleen Occupation VP Sourcing Procurement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 390.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>8</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6394</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		1	5		2	0	0	8												

<p>B. Full Name (Last, First, Middle Initial) Danny Anderson</p> <p>Mailing Address 5360 Legacy Drive Building 2 Suite 100</p> <p>City State Zip Code Plano TX 75024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Safety-Kleen Occupation VP Sourcing Procurement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 420.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>8</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6427</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		2	8		2	0	0	8												

<p>C. Full Name (Last, First, Middle Initial) Danny Anderson</p> <p>Mailing Address 5360 Legacy Drive Building 2 Suite 100</p> <p>City State Zip Code Plano TX 75024</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Safety-Kleen Occupation VP Sourcing Procurement</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 450.00</p>	<p>Date of Receipt <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Transaction ID: SA11AI.6456</p> <p>Amount of Each Receipt this Period 30.00</p> <p>Contribution</p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	0		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	0		2	0	0	8												

SUBTOTAL of Receipts This Page (optional)	90.00
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 8 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Danny Anderson		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2 Suite 100		<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6601
Name of Employer Safety-Kleen		Occupation VP Sourcing Procurement	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 480.00	<input type="text" value="30.00"/>
Contribution			

B.	Full Name (Last, First, Middle Initial) Steve Black		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6295
Name of Employer Safety-Kleen		Occupation VP Human Resources West Group	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 278.84	<input type="text" value="19.23"/>
Contribution			

C.	Full Name (Last, First, Middle Initial) Steve Black		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6337
Name of Employer Safety-Kleen		Occupation VP Human Resources West Group	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 298.07	<input type="text" value="19.23"/>
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="68.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Steve Black	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6373
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP Human Resources West Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 317.30	

B.	Full Name (Last, First, Middle Initial) Steve Black	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6395
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP Human Resources West Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 336.53	

C.	Full Name (Last, First, Middle Initial) Steve Black	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6428
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP Human Resources West Group Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 355.76	

SUBTOTAL of Receipts This Page (optional)	57.69
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 10 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steve Black

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation VP Human Resources West Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 374.99

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.6457

Amount of Each Receipt this Period 19.23

Contribution

B. Full Name (Last, First, Middle Initial)
Steve Black

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation VP Human Resources West Group

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 394.22

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 9 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.6602

Amount of Each Receipt this Period 19.23

Contribution

C. Full Name (Last, First, Middle Initial)
Donald Budhu

Mailing Address 5360 Legacy Dr
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation VP Planning & Analysis

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 327.84

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

Transaction ID: SA11AI.6296

Amount of Each Receipt this Period 19.23

Contribution

SUBTOTAL of Receipts This Page (optional) ► 57.69

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 11 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 16 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6338
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 347.07	<input type="text"/> 19.23
Contribution			

B.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 31 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6374
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 366.30	<input type="text"/> 19.23
Contribution			

C.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6396
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 385.53	<input type="text"/> 19.23
Contribution			

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 57.69
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6429
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 404.76	Contribution

B.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6458
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 423.99	Contribution

C.	Full Name (Last, First, Middle Initial) Donald Budhu		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6603
Name of Employer Safety-Kleen		Occupation VP Planning & Analysis	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 443.22	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 57.69
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Daniel Callaghan		Date of Receipt MM / DD / YYYY 07 / 02 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6297
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen	Occupation Director, Waste Services	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22	

B.

Full Name (Last, First, Middle Initial) Daniel Callaghan		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6339
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen	Occupation Director, Waste Services	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45	

C.

Full Name (Last, First, Middle Initial) Daniel Callaghan		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6375
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen	Occupation Director, Waste Services	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68	

SUBTOTAL of Receipts This Page (optional)	57.69
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 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Daniel Callaghan	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6397
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Waste Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 326.91	

B.	Full Name (Last, First, Middle Initial) Daniel Callaghan	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6430
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Waste Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 346.14	

C.	Full Name (Last, First, Middle Initial) Daniel Callaghan	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6459
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Waste Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 365.37	

SUBTOTAL of Receipts This Page (optional)	57.69
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Daniel Callaghan	Date of Receipt MM / DD / YYYY 09 / 24 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6604
	City Plano State TX Zip Code 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Waste Services Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 384.60	

B.	Full Name (Last, First, Middle Initial) Michael Crawford	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 6625 W. Frye Rd	Transaction ID: SA11AI.6431
	City Chandler State AZ Zip Code 85226	Amount of Each Receipt this Period 11.54
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation District Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 207.72	

C.	Full Name (Last, First, Middle Initial) Michael Crawford	Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 6625 W. Frye Rd	Transaction ID: SA11AI.6460
	City Chandler State AZ Zip Code 85226	Amount of Each Receipt this Period 11.54
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation District Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 219.26	

SUBTOTAL of Receipts This Page (optional)	42.31
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 16 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael Crawford	Date of Receipt MM / DD / YYYY 09 / 24 / 2008
	Mailing Address 6625 W. Frye Rd	Transaction ID: SA11AI.6594
	City Chandler State AZ Zip Code 85226	Amount of Each Receipt this Period 11.54
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation District Manager Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.80	

B.	Full Name (Last, First, Middle Initial) David E Eckelbarger	Date of Receipt MM / DD / YYYY 07 / 02 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6300
	City Plano State TX Zip Code 75024	Amount of Each Receipt this Period 96.15
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation SVP Business Process & Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1346.10	

C.	Full Name (Last, First, Middle Initial) David E Eckelbarger	Date of Receipt MM / DD / YYYY 07 / 16 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6342
	City Plano State TX Zip Code 75024	Amount of Each Receipt this Period 96.15
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation SVP Business Process & Development Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1442.25	

SUBTOTAL of Receipts This Page (optional)	203.84
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 17 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) David E Eckelbarger		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6377
Name of Employer Safety-Kleen		Occupation SVP Business Process & Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1538.40"/>	<input type="text" value="96.15"/>
			Contribution

B.	Full Name (Last, First, Middle Initial) David E Eckelbarger		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="08"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6400
Name of Employer Safety-Kleen		Occupation SVP Business Process & Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1634.55"/>	<input type="text" value="96.15"/>
			Contribution

C.	Full Name (Last, First, Middle Initial) David E Eckelbarger		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="08"/> / <input type="text" value="28"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6433
Name of Employer Safety-Kleen		Occupation SVP Business Process & Development	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="1730.70"/>	<input type="text" value="96.15"/>
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="288.45"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) David E Eckelbarger		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6464
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.15
Name of Employer Safety-Kleen	Occupation SVP Business Process & Development	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1826.85	

B.

Full Name (Last, First, Middle Initial) David E Eckelbarger		Date of Receipt MM / DD / YYYY 09 / 24 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6606
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 96.15
Name of Employer Safety-Kleen	Occupation SVP Business Process & Development	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1923.00	

C.

Full Name (Last, First, Middle Initial) Wayne Flake		Date of Receipt MM / DD / YYYY 07 / 02 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6301
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Safety-Kleen	Occupation Vice President, IT Applications	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 403.90	

SUBTOTAL of Receipts This Page (optional)	▶	221.15
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 19 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Wayne Flake

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Vice President, IT Applications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 432.75

Date of Receipt 07 / 16 / 2008
Transaction ID: SA11AI.6343
Amount of Each Receipt this Period 28.85
Contribution

B. Full Name (Last, First, Middle Initial)
Wayne Flake

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Vice President, IT Applications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 461.60

Date of Receipt 07 / 31 / 2008
Transaction ID: SA11AI.6378
Amount of Each Receipt this Period 28.85
Contribution

C. Full Name (Last, First, Middle Initial)
Wayne Flake

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Vice President, IT Applications

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.45

Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.6401
Amount of Each Receipt this Period 28.85
Contribution

SUBTOTAL of Receipts This Page (optional) ► 86.55

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 20 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Wayne Flake		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6434
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Safety-Kleen	Occupation Vice President, IT Applications	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 519.30	

B.

Full Name (Last, First, Middle Initial) Wayne Flake		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6465
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Safety-Kleen	Occupation Vice President, IT Applications	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 548.15	

C.

Full Name (Last, First, Middle Initial) Wayne Flake		Date of Receipt MM / DD / YYYY 09 / 24 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6607
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.85
Name of Employer Safety-Kleen	Occupation Vice President, IT Applications	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 577.00	

SUBTOTAL of Receipts This Page (optional)	▶	86.55
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 21 / 69

(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Frederick J Florjancic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation CEO & President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2692.34

Date of Receipt

M M / D D / Y Y Y Y
07 / 02 / 2008

Transaction ID: SA11AI.6302

Amount of Each Receipt this Period

192.31

Contribution

B.

Full Name (Last, First, Middle Initial)
Frederick J Florjancic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation CEO & President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 2884.65

Date of Receipt

M M / D D / Y Y Y Y
07 / 16 / 2008

Transaction ID: SA11AI.6344

Amount of Each Receipt this Period

192.31

Contribution

C.

Full Name (Last, First, Middle Initial)
Frederick J Florjancic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation CEO & President

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 3076.96

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2008

Transaction ID: SA11AI.6379

Amount of Each Receipt this Period

192.31

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

576.93

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 22 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Frederick J Florjancic		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 1 5 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6402
Name of Employer Safety-Kleen		Occupation CEO & President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.31
		<input type="text"/> 3269.27	Contribution

B.	Full Name (Last, First, Middle Initial) Frederick J Florjancic		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6435
Name of Employer Safety-Kleen		Occupation CEO & President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.31
		<input type="text"/> 3461.58	Contribution

C.	Full Name (Last, First, Middle Initial) Frederick J Florjancic		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 9 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6466
Name of Employer Safety-Kleen		Occupation CEO & President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.31
		<input type="text"/> 3653.89	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 576.93
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Frederick J Florjancic		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6608
Name of Employer Safety-Kleen		Occupation CEO & President	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 192.31
		<input type="text"/> 3846.20	Contribution

B.	Full Name (Last, First, Middle Initial) Michael N Fraser		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 02 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6303
Name of Employer Safety-Kleen		Occupation VP National Accounts	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.46
		<input type="text"/> 423.06	Contribution

C.	Full Name (Last, First, Middle Initial) Michael N Fraser		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 16 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6345
Name of Employer Safety-Kleen		Occupation VP National Accounts	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 38.46
		<input type="text"/> 461.52	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 269.23
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael N Fraser	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 5360 Legacy Dr Building 2, Suite 100	Transaction ID: SA11AI.6380
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP National Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 499.98

B.	Full Name (Last, First, Middle Initial) Michael N Fraser	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5360 Legacy Dr Building 2, Suite 100	Transaction ID: SA11AI.6403
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP National Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 538.44

C.	Full Name (Last, First, Middle Initial) Michael N Fraser	Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5360 Legacy Dr Building 2, Suite 100	Transaction ID: SA11AI.6436
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP National Accounts Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 576.90

SUBTOTAL of Receipts This Page (optional)	115.38
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 25 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael N Fraser		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 10 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6467
Name of Employer Safety-Kleen		Occupation VP National Accounts	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 615.36	<input type="text"/> 38.46
			Contribution

B.	Full Name (Last, First, Middle Initial) Michael N Fraser		Date of Receipt
	Mailing Address 5360 Legacy Dr Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 24 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6609
Name of Employer Safety-Kleen		Occupation VP National Accounts	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 653.82	<input type="text"/> 38.46
			Contribution

C.	Full Name (Last, First, Middle Initial) Matthew Gudorf		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 02 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6306
Name of Employer Safety-Kleen		Occupation Director, Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 266.00	<input type="text"/> 19.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 95.92
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 26 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 285.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.6348

Amount of Each Receipt this Period 19.00

Contribution

B. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 304.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.6382

Amount of Each Receipt this Period 19.00

Contribution

C. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 323.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 0 8 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.6406

Amount of Each Receipt this Period 19.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 57.00

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 27 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 342.00

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

Transaction ID: SA11AI.6439

Amount of Each Receipt this Period 19.00

Contribution

B. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 361.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.6470

Amount of Each Receipt this Period 19.00

Contribution

C. Full Name (Last, First, Middle Initial)
Matthew Gudorf

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Director, Marketing

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.6611

Amount of Each Receipt this Period 19.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 57.00

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 28 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Connie R Kopp	Date of Receipt MM / DD / YYYY 07 / 02 / 2008
	Mailing Address 568 Briarwood Lane	Transaction ID: SA11AI.6308
	City State Zip Code Port Washington WI 53074	Amount of Each Receipt this Period 15.39
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.46	

B.	Full Name (Last, First, Middle Initial) Connie R Kopp	Date of Receipt MM / DD / YYYY 07 / 16 / 2008
	Mailing Address 568 Briarwood Lane	Transaction ID: SA11AI.6350
	City State Zip Code Port Washington WI 53074	Amount of Each Receipt this Period 15.39
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 230.85	

C.	Full Name (Last, First, Middle Initial) Connie R Kopp	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 568 Briarwood Lane	Transaction ID: SA11AI.6383
	City State Zip Code Port Washington WI 53074	Amount of Each Receipt this Period 15.39
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 246.24	

SUBTOTAL of Receipts This Page (optional)	▶	46.17
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 29 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Connie R Kopp		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 568 Briarwood Lane		Transaction ID: SA11AI.6408
City Port Washington	State WI	Zip Code 53074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.39
Name of Employer Safety-Kleen	Occupation Director, Human Resources	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 261.63	

B.

Full Name (Last, First, Middle Initial) Connie R Kopp		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
Mailing Address 568 Briarwood Lane		Transaction ID: SA11AI.6441
City Port Washington	State WI	Zip Code 53074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.39
Name of Employer Safety-Kleen	Occupation Director, Human Resources	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.02	

C.

Full Name (Last, First, Middle Initial) Connie R Kopp		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
Mailing Address 568 Briarwood Lane		Transaction ID: SA11AI.6472
City Port Washington	State WI	Zip Code 53074
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 15.39
Name of Employer Safety-Kleen	Occupation Director, Human Resources	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 292.41	

SUBTOTAL of Receipts This Page (optional)	▶	46.17
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 30 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Connie R Kopp

Mailing Address 568 Briarwood Lane

City State Zip Code
Port Washington WI 53074

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

Name of Employer Safety-Kleen Occupation Director, Human Resources

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 307.80

Date of Receipt
M M / D D / Y Y Y Y Y
09 / 24 / 2008

Transaction ID: SA11AI.6612

Amount of Each Receipt this Period
15.39

Contribution

B.

Full Name (Last, First, Middle Initial)
Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code
Fishers IN 46038

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

Name of Employer Safety-Kleen Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 259.61

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 02 / 2008

Transaction ID: SA11AI.6311

Amount of Each Receipt this Period
19.23

Contribution

C.

Full Name (Last, First, Middle Initial)
Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code
Fishers IN 46038

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

Name of Employer Safety-Kleen Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 278.84

Date of Receipt
M M / D D / Y Y Y Y Y
07 / 16 / 2008

Transaction ID: SA11AI.6353

Amount of Each Receipt this Period
19.23

Contribution

SUBTOTAL of Receipts This Page (optional) ► **53.85**

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 31 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code
Fishers IN 46038

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

Name of Employer Safety-Kleen Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 298.07

Date of Receipt
 M M / D D / Y Y Y Y
 07 / 31 / 2008

Transaction ID: SA11AI.6368

Amount of Each Receipt this Period 19.23

Contribution

B. Full Name (Last, First, Middle Initial)
Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code
Fishers IN 46038

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

Name of Employer Safety-Kleen Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 317.30

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 15 / 2008

Transaction ID: SA11AI.6411

Amount of Each Receipt this Period 19.23

Contribution

C. Full Name (Last, First, Middle Initial)
Rodney K Martin

Mailing Address 11249 White Water Way

City State Zip Code
Fishers IN 46038

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

Name of Employer Safety-Kleen Occupation Market Manager

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 336.53

Date of Receipt
 M M / D D / Y Y Y Y
 08 / 28 / 2008

Transaction ID: SA11AI.6444

Amount of Each Receipt this Period 19.23

Contribution

SUBTOTAL of Receipts This Page (optional) ► 57.69

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 32 / 69
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Rodney K Martin		Date of Receipt
	Mailing Address 11249 White Water Way		<input type="text" value="09"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fishers	IN	46038
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6475
Name of Employer Safety-Kleen		Occupation Market Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="19.23"/>
		<input type="text" value="355.76"/>	Contribution

B.	Full Name (Last, First, Middle Initial) Rodney K Martin		Date of Receipt
	Mailing Address 11249 White Water Way		<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Fishers	IN	46038
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6597
Name of Employer Safety-Kleen		Occupation Market Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="19.23"/>
		<input type="text" value="374.99"/>	Contribution

C.	Full Name (Last, First, Middle Initial) Julie Moran		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text" value="07"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6312
Name of Employer Safety-Kleen		Occupation SVP General Manager	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text" value="35.00"/>
		<input type="text" value="315.00"/>	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="73.46"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Julie Moran		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6354
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Safety-Kleen	Occupation SVP General Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00	

B.

Full Name (Last, First, Middle Initial) Julie Moran		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6369
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Safety-Kleen	Occupation SVP General Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 385.00	

C.

Full Name (Last, First, Middle Initial) Julie Moran		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6412
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 35.00
Name of Employer Safety-Kleen	Occupation SVP General Manager	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

SUBTOTAL of Receipts This Page (optional)	▶	105.00
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 34 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Julie Moran

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation SVP General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 455.00

Date of Receipt 08 / 28 / 2008

Transaction ID: SA11AI.6445

Amount of Each Receipt this Period 35.00

Contribution

B. Full Name (Last, First, Middle Initial)
Julie Moran

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation SVP General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt 09 / 10 / 2008

Transaction ID: SA11AI.6476

Amount of Each Receipt this Period 35.00

Contribution

C. Full Name (Last, First, Middle Initial)
Julie Moran

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation SVP General Manager

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 525.00

Date of Receipt 09 / 24 / 2008

Transaction ID: SA11AI.6598

Amount of Each Receipt this Period 35.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► 105.00

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 35 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Carla Rolnic		Date of Receipt MM / DD / YYYY 07 / 02 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6313
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Safety-Kleen	Occupation Information Technology	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 560.00	

B.

Full Name (Last, First, Middle Initial) Carla Rolnic		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6355
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Safety-Kleen	Occupation Information Technology	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

C.

Full Name (Last, First, Middle Initial) Carla Rolnic		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6386
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
Name of Employer Safety-Kleen	Occupation Information Technology	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 640.00	

SUBTOTAL of Receipts This Page (optional)	▶	120.00
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 36 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Carla Rolnic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 680.00

Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.6413
 Amount of Each Receipt this Period 40.00
 Contribution

B. Full Name (Last, First, Middle Initial)
Carla Rolnic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt 08 / 28 / 2008
Transaction ID: SA11AI.6446
 Amount of Each Receipt this Period 40.00
 Contribution

C. Full Name (Last, First, Middle Initial)
Carla Rolnic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City Plano State TX Zip Code 75024

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

Name of Employer Safety-Kleen Occupation Information Technology

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 760.00

Date of Receipt 09 / 10 / 2008
Transaction ID: SA11AI.6477
 Amount of Each Receipt this Period 40.00
 Contribution

SUBTOTAL of Receipts This Page (optional) ► 120.00

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 37 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Carla Rolnic

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation Information Technology

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

Date of Receipt
MM / DD / YYYY
09 / 24 / 2008

Transaction ID: SA11AI.6615

Amount of Each Receipt this Period
40.00

Contribution

B. Full Name (Last, First, Middle Initial)
Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City State Zip Code
Winters CA 95694

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

Name of Employer Safety-Kleen Occupation VP Environmental Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 546.00

Date of Receipt
MM / DD / YYYY
07 / 02 / 2008

Transaction ID: SA11AI.6314

Amount of Each Receipt this Period
39.00

Contribution

C. Full Name (Last, First, Middle Initial)
Billy Ray Ross Jr

Mailing Address 114 Riverview Ct.

City State Zip Code
Winters CA 95694

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

Name of Employer Safety-Kleen Occupation VP Environmental Compliance

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 585.00

Date of Receipt
MM / DD / YYYY
07 / 16 / 2008

Transaction ID: SA11AI.6356

Amount of Each Receipt this Period
39.00

Contribution

SUBTOTAL of Receipts This Page (optional) ► **118.00**

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 38 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Billy Ray Ross Jr
Mailing Address 114 Riverview Ct.
City Winters State CA Zip Code 95694
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation VP Environmental Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 624.00
Date of Receipt 07 / 31 / 2008
Transaction ID: SA11AI.6387
Amount of Each Receipt this Period 39.00
Contribution

B. Full Name (Last, First, Middle Initial)
Billy Ray Ross Jr
Mailing Address 114 Riverview Ct.
City Winters State CA Zip Code 95694
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation VP Environmental Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 663.00
Date of Receipt 08 / 15 / 2008
Transaction ID: SA11AI.6414
Amount of Each Receipt this Period 39.00
Contribution

C. Full Name (Last, First, Middle Initial)
Billy Ray Ross Jr
Mailing Address 114 Riverview Ct.
City Winters State CA Zip Code 95694
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation VP Environmental Compliance
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 702.00
Date of Receipt 08 / 28 / 2008
Transaction ID: SA11AI.6447
Amount of Each Receipt this Period 39.00
Contribution

SUBTOTAL of Receipts This Page (optional) ► 117.00
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 39 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Billy Ray Ross Jr		Date of Receipt	
	Mailing Address 114 Riverview Ct.		M M / D D / Y Y Y Y Y 09 / 10 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.6478
	Winters	CA	95694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		39.00	
Name of Employer Safety-Kleen		Occupation VP Environmental Compliance		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		741.00		

B.	Full Name (Last, First, Middle Initial) Billy Ray Ross Jr		Date of Receipt	
	Mailing Address 114 Riverview Ct.		M M / D D / Y Y Y Y Y 09 / 24 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.6616
	Winters	CA	95694	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		39.00	
Name of Employer Safety-Kleen		Occupation VP Environmental Compliance		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		780.00		

C.	Full Name (Last, First, Middle Initial) William Joseph Sheils		Date of Receipt	
	Mailing Address 3978 Anglia Ct.		M M / D D / Y Y Y Y Y 07 / 02 / 2008	
	City	State	Zip Code	Transaction ID: SA11AI.6315
	W. Bloomfield	MI	48323	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		19.23	
Name of Employer Safety-Kleen		Occupation Director, Lubricant Sales		Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼		
		269.22		

SUBTOTAL of Receipts This Page (optional)	▶	97.23
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 40 / 69
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
William Joseph Sheils
Mailing Address 3978 Anglia Ct.
City State Zip Code
W. Bloomfield MI 48323
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation Director, Lubricant Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 288.45
Date of Receipt MM / DD / YYYY
07 / 16 / 2008
Transaction ID: SA11AI.6357
Amount of Each Receipt this Period 19.23
Contribution

B. Full Name (Last, First, Middle Initial)
William Joseph Sheils
Mailing Address 3978 Anglia Ct.
City State Zip Code
W. Bloomfield MI 48323
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation Director, Lubricant Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 307.68
Date of Receipt MM / DD / YYYY
07 / 31 / 2008
Transaction ID: SA11AI.6370
Amount of Each Receipt this Period 19.23
Contribution

C. Full Name (Last, First, Middle Initial)
William Joseph Sheils
Mailing Address 3978 Anglia Ct.
City State Zip Code
W. Bloomfield MI 48323
FEC ID number of contributing federal political committee. **C**
Name of Employer Safety-Kleen Occupation Director, Lubricant Sales
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 326.91
Date of Receipt MM / DD / YYYY
08 / 15 / 2008
Transaction ID: SA11AI.6415
Amount of Each Receipt this Period 19.23
Contribution

SUBTOTAL of Receipts This Page (optional) ► 57.69
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 41 / 69

(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City State Zip Code
W. Bloomfield MI 48323

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

Name of Employer Occupation
Safety-Kleen Director, Lubricant Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 346.14

Date of Receipt

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

Transaction ID: SA11AI.6448

Amount of Each Receipt this Period

19.23

Contribution

B.

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City State Zip Code
W. Bloomfield MI 48323

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

Name of Employer Occupation
Safety-Kleen Director, Lubricant Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 365.37

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.6479

Amount of Each Receipt this Period

19.23

Contribution

C.

Full Name (Last, First, Middle Initial)

William Joseph Sheils

Mailing Address 3978 Anglia Ct.

City State Zip Code
W. Bloomfield MI 48323

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

Name of Employer Occupation
Safety-Kleen Director, Lubricant Sales

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 384.60

Date of Receipt

M M / D D / Y Y Y Y
0 9 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.6599

Amount of Each Receipt this Period

19.23

Contribution

SUBTOTAL of Receipts This Page (optional)

57.69

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 42 / 69

(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Toby L Todd

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation VP Human Resources

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.6317

Amount of Each Receipt this Period
20.00

Contribution

B.

Full Name (Last, First, Middle Initial)
Toby L Todd

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation VP Human Resources

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

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.6359

Amount of Each Receipt this Period
20.00

Contribution

C.

Full Name (Last, First, Middle Initial)
Toby L Todd

Mailing Address 5360 Legacy Drive
Building 2, Suite 100

City State Zip Code
Plano TX 75024

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

Name of Employer Safety-Kleen Occupation VP Human Resources

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.00

Date of Receipt

M M / D D / Y Y Y Y
0 7 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.6388

Amount of Each Receipt this Period
20.00

Contribution

SUBTOTAL of Receipts This Page (optional) ▶

60.00

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 43 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Toby L Todd		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6417
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Safety-Kleen		Occupation VP Human Resources
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	Contribution

B.	Full Name (Last, First, Middle Initial) Toby L Todd		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6450
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Safety-Kleen		Occupation VP Human Resources
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00	Contribution

C.	Full Name (Last, First, Middle Initial) Toby L Todd		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6481
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Safety-Kleen		Occupation VP Human Resources
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00	Contribution

SUBTOTAL of Receipts This Page (optional)	▶	60.00
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 44 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Toby L Todd	Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 4 / 2 0 0 8
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6617
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation VP Human Resources Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) James M Waisanen	Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 0 2 / 2 0 0 8
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6318
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Processing & Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 521.52	

C.	Full Name (Last, First, Middle Initial) James M Waisanen	Date of Receipt M M / D D / Y Y Y Y Y 0 7 / 1 6 / 2 0 0 8
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6360
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 38.46
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Processing & Distribution Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 559.98	

SUBTOTAL of Receipts This Page (optional)	▶	96.92
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 45 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) James M Waisanen		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6389
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Safety-Kleen	Occupation Director, Processing & Distribution	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 598.44	

B.

Full Name (Last, First, Middle Initial) James M Waisanen		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6418
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Safety-Kleen	Occupation Director, Processing & Distribution	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 636.90	

C.

Full Name (Last, First, Middle Initial) James M Waisanen		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6451
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Safety-Kleen	Occupation Director, Processing & Distribution	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 675.36	

SUBTOTAL of Receipts This Page (optional)	115.38
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 46 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) James M Waisanen		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6482
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Safety-Kleen	Occupation Director, Processing & Distribution	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 713.82	

B.

Full Name (Last, First, Middle Initial) James M Waisanen		Date of Receipt MM / DD / YYYY 09 / 24 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6619
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.46
Name of Employer Safety-Kleen	Occupation Director, Processing & Distribution	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 752.28	

C.

Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6362
City Plano	State TX	Zip Code 75024
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer Safety-Kleen	Occupation Vice President Marketing	Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional)	▶	106.92
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 47 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 07 / 31 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6391
Name of Employer Safety-Kleen		Occupation Vice President Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 30.00
			Contribution

B.	Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 15 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6420
Name of Employer Safety-Kleen		Occupation Vice President Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.00	<input type="text"/> 30.00
			Contribution

C.	Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 08 / 28 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6453
Name of Employer Safety-Kleen		Occupation Vice President Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 30.00
			Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 90.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 10 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6484
Name of Employer Safety-Kleen		Occupation Vice President Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 330.00	Contribution

B.	Full Name (Last, First, Middle Initial) Mitchell Windsor		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 09 / 24 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6621
Name of Employer Safety-Kleen		Occupation Vice President Marketing	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 30.00
		<input type="text"/> 360.00	Contribution

C.	Full Name (Last, First, Middle Initial) Richard Wojnarowski		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 07 / 02 / 2008
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6321
Name of Employer Safety-Kleen		Occupation Director, Customer Service Support	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 269.22	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 79.23
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 69
	<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Wojnarowski	Date of Receipt MM / DD / YYYY 07 / 16 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6363
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Customer Service Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 288.45	

B.	Full Name (Last, First, Middle Initial) Richard Wojnarowski	Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6392
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Customer Service Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 307.68	

C.	Full Name (Last, First, Middle Initial) Richard Wojnarowski	Date of Receipt MM / DD / YYYY 08 / 15 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100	Transaction ID: SA11AI.6421
	City State Zip Code Plano TX 75024	Amount of Each Receipt this Period 19.23
	FEC ID number of contributing federal political committee. C	Contribution
	Name of Employer Safety-Kleen Occupation Director, Customer Service Support Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 326.91	

SUBTOTAL of Receipts This Page (optional)	57.69
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 50 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Wojnarowski		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 8 / 2 8 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6454
Name of Employer Safety-Kleen		Occupation Director, Customer Service Support	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 346.14	Contribution

B.	Full Name (Last, First, Middle Initial) Richard Wojnarowski		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 9 / 1 0 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6485
Name of Employer Safety-Kleen		Occupation Director, Customer Service Support	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 365.37	Contribution

C.	Full Name (Last, First, Middle Initial) Richard Wojnarowski		Date of Receipt
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 9 / 2 4 / 2 0 0 8
	City	State	Zip Code
	Plano	TX	75024
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.6622
Name of Employer Safety-Kleen		Occupation Director, Customer Service Support	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 19.23
		<input type="text"/> 384.60	Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 57.69
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 51 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 07 / 02 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6322
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
	Name of Employer Safety-Kleen	Occupation Sr. Director Engineering	Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 269.22
---	------------------------------------

B.	Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 07 / 16 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6364
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
	Name of Employer Safety-Kleen	Occupation Sr. Director Engineering	Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.45
---	------------------------------------

C.	Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 07 / 31 / 2008
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6393
	City Plano	State TX	Zip Code 75024
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23
	Name of Employer Safety-Kleen	Occupation Sr. Director Engineering	Contribution

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 307.68
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SUBTOTAL of Receipts This Page (optional)	57.69
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 52 / 69
(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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 08 / 15 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6423
City Plano State TX Zip Code 75024	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen Occupation Sr. Director Engineering	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 326.91		

B.

Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 08 / 28 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6455
City Plano State TX Zip Code 75024	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen Occupation Sr. Director Engineering	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 346.14		

C.

Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt MM / DD / YYYY 09 / 10 / 2008
Mailing Address 5360 Legacy Drive Building 2, Suite 100		Transaction ID: SA11AI.6486
City Plano State TX Zip Code 75024	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 19.23
Name of Employer Safety-Kleen Occupation Sr. Director Engineering	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Contribution
Aggregate Year-to-Date ▼ 365.37		

SUBTOTAL of Receipts This Page (optional)	▶	57.69
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 53 / 69
(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
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Richard Philip Zink		Date of Receipt		
	Mailing Address 5360 Legacy Drive Building 2, Suite 100		M M / D D / Y Y Y Y 09 / 24 / 2008		
	City Plano	State TX	Zip Code 75024	Transaction ID: SA11AI.6623	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.23		
	Name of Employer Safety-Kleen	Occupation Sr. Director Engineering		Contribution	
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 384.60			

SUBTOTAL of Receipts This Page (optional)	19.23
TOTAL This Period (last page this line number only)	5305.23

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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) ALEXANDER FOR SENATE 2008 INC</p> <p>Mailing Address 228 S WASHINGTON STREET SUITE 115</p> <p>City ALEXANDRIA State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name LAMAR ALEXANDER</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 00</p>	<p>Transaction ID: SB23.6530 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <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>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		1	1		2	0	0	8													
2000.00																						
<p>B. Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ FOR CONGRESS</p> <p>Mailing Address P.O. Box 2232</p> <p>City Jenkintown State PA Zip Code 19046</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name ALLYSON Y SCHWARTZ</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: PA District: 13</p>	<p>Transaction ID: SB23.6518 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <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>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	8		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		0	8		2	0	0	8													
1000.00																						
<p>C. Full Name (Last, First, Middle Initial) BARTLETT FOR CONGRESS COMMITTEE</p> <p>Mailing Address P. O. Box 245 PO BOX 3662</p> <p>City Middletown State MD Zip Code 21769</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name ROSCOE G. JR. BARTLETT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District: 06</p>	<p>Transaction ID: SB23.6631 Date of Disbursement: <table border="1" style="width: 100%; text-align: center;"> <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>2</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	5		2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9		2	5		2	0	0	8													
1000.00																						

SUBTOTAL of Disbursements This Page (optional)	<table border="1" style="width: 100%;"><tr><td>4000.00</td></tr></table>	4000.00
4000.00		
TOTAL This Period (last page this line number only)	<table border="1" style="width: 100%;"><tr><td> </td></tr></table>	

**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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.6324 Date of Disbursement 07 / 10 / 2008
	Mailing Address P.O. Box 261060	Amount of Each Disbursement this Period 1000.00
	City Los Angeles State CA Zip Code 90026	
	Purpose of Disbursement Contribution Candidate Name XAVIER BECERRA Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) BECERRA FOR CONGRESS	Transaction ID: SB23.6494 Date of Disbursement 09 / 15 / 2008
	Mailing Address P.O. Box 261060	Amount of Each Disbursement this Period 1000.00
	City Los Angeles State CA Zip Code 90026	
	Purpose of Disbursement Contribution Candidate Name XAVIER BECERRA Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) BEN CHANDLER FOR CONGRESS	Transaction ID: SB23.6591 Date of Disbursement 09 / 18 / 2008
	Mailing Address P. O. Box 12678	Amount of Each Disbursement this Period 1000.00
	City Lexington State KY Zip Code 40508	
	Purpose of Disbursement Contribution Candidate Name A.B. III CHANDLER Category/Type 011	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 06 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) BLUMENAUER FOR CONGRESS	Transaction ID: SB23.6574 Date of Disbursement 09 / 18 / 2008
	Mailing Address 830 NE Holladay Suite 105	Amount of Each Disbursement this Period 1000.00
	City Portland State OR Zip Code 97232	
	Purpose of Disbursement Contribution Candidate Name EARL BLUMENAUER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 03	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) CHARLES A. GONZALEZ CONGRESSIONAL CAMPAIGN	Transaction ID: SB23.6641 Date of Disbursement 09 / 15 / 2008
	Mailing Address PO Box 12612	Amount of Each Disbursement this Period 2000.00
	City San Antonio State TX Zip Code 78212	
	Purpose of Disbursement Campaign Contribution Candidate Name CHARLES A GONZALEZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 20	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) CITIZENS FOR TOM PETRI	Transaction ID: SB23.6559 Date of Disbursement 09 / 15 / 2008
	Mailing Address P.O. Box 270	Amount of Each Disbursement this Period 1000.00
	City Fond du Lac State WI Zip Code 54936	
	Purpose of Disbursement Contribution Candidate Name TOM PETRI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 06	011 Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	4000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 57 / 69

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CONGRESSMAN JOE BARTON COMMITTEE, THE	Transaction ID: SB23.6498 Date of Disbursement
	Mailing Address P.O. Box 1444	<input type="text" value="09"/> / <input type="text" value="18"/> / <input type="text" value="2008"/>
	City Ennis State TX Zip Code 75120	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name JOE L BARTON	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 06	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS	Transaction ID: SB23.6333 Date of Disbursement
	Mailing Address 84-56 Grand Avenue	<input type="text" value="07"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City Elmhurst State NY Zip Code 11373	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name JOSEPH CROWLEY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2008	Transaction ID: SB23.6637 Date of Disbursement
	Mailing Address 5915 EASTMAN AVE. SUITE 100 5915 EASTMAN AVE. SUITE 100	<input type="text" value="09"/> / <input type="text" value="15"/> / <input type="text" value="2008"/>
	City MIDLAND State MI Zip Code 48640	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name DAVID LEE CAMP	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) DEFAZIO FOR CONGRESS</p> <p>Mailing Address PO Box 1316</p> <p>City Springfield State OR Zip Code 97477</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name PETER A DEFAZIO</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 04</p>	<p>Transaction ID: SB23.6537 Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) DOGGETT FOR US CONGRESS</p> <p>Mailing Address PO Box 5843</p> <p>City Austin State TX Zip Code 78763</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name LLOYD A MR. DOGGETT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 25</p>	<p>Transaction ID: SB23.6500 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) FRIENDS FOR HARRY REID</p> <p>Mailing Address P.O. BOX 19163</p> <p>City LAS VEGAS State NV Zip Code 89132</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name HARRY REID</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NV District: 00</p>	<p>Transaction ID: SB23.6571 Date of Disbursement 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional)	4000.00
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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER	Transaction ID: SB23.6490 Date of Disbursement
	Mailing Address PO BOX 641751	<input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City LOS ANGELES State CA Zip Code 90064	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name BARBARA BOXER	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) FRIENDS OF DICK DURBIN COMMITTEE	Transaction ID: SB23.6568 Date of Disbursement
	Mailing Address PO BOX 1949	<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City SPRINGFIELD State IL Zip Code 62705	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name RICHARD J DURBIN	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) FRIENDS OF GORDON SMITH	Transaction ID: SB23.6489 Date of Disbursement
	Mailing Address 228 S WASHINGTON STE 115	<input type="text" value="09"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City ALEXANDRIA State VA Zip Code 22314	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name GORDON HAROLD SMITH	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF JAY ROCKEFELLER

Mailing Address PO BOX 1909

City CHARLESTON State WV Zip Code 25327

Purpose of Disbursement
Contribution

Candidate Name
JOHN DAVISON IV ROCKEFELLER

Office Sought: House
 Senate
 President

State: WV District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6509

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

B. Full Name (Last, First, Middle Initial)
FRIENDS OF JAY ROCKEFELLER

Mailing Address PO BOX 1909

City CHARLESTON State WV Zip Code 25327

Purpose of Disbursement
Contribution

Candidate Name
JOHN DAVISON IV ROCKEFELLER

Office Sought: House
 Senate
 President

State: WV District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6528

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

C. Full Name (Last, First, Middle Initial)
FRIENDS OF JIM OBERSTAR

Mailing Address 1017 8th St NE

City Washington State DC Zip Code 20002

Purpose of Disbursement
Contribution

Candidate Name
JAMES L HON. OBERSTAR

Office Sought: House
 Senate
 President

State: MN District: 08

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.6543

Date of Disbursement

/ /

Amount of Each Disbursement this Period

Category/
Type

SUBTOTAL of Disbursements This Page (optional) ▶

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 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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JOHN TANNER	Transaction ID: SB23.6326 Date of Disbursement	
	Mailing Address Post Office Box 1994 Post Office Box 1994	<input type="text" value="07"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="08"/>	
	City Union City State Zip Code TN 38281	Amount of Each Disbursement this Period	<input type="text" value="1000.00"/>
	Purpose of Disbursement Contribution Candidate Name JOHN S. TANNER	<input type="text" value="011"/> Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) FRIENDS OF MARY LANDRIEU INC	Transaction ID: SB23.6497 Date of Disbursement	
	Mailing Address 607 14TH STREET NW SUITE 800 SUITE 1434	<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="08"/>	
	City WASHINGTON State DC Zip Code 20005	Amount of Each Disbursement this Period	<input type="text" value="1000.00"/>
	Purpose of Disbursement Contribution Candidate Name MARY L LANDRIEU	<input type="text" value="011"/> Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FRIENDS OF MAX BAUCUS	Transaction ID: SB23.6496 Date of Disbursement	
	Mailing Address PO BOX 586	<input type="text" value="09"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="08"/>	
	City HELENA State MT Zip Code 59624	Amount of Each Disbursement this Period	<input type="text" value="2000.00"/>
	Purpose of Disbursement Contribution Candidate Name MAX BAUCUS	<input type="text" value="011"/> Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF SAM JOHNSON	Transaction ID: SB23.6327 Date of Disbursement
	Mailing Address 1611 Avenue K	<input type="text" value="07"/> <input type="text" value="10"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City Plano State TX Zip Code 75074	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2300.00"/>
	Candidate Name SAMUEL ROBERT JOHNSON	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GENE GREEN CONGRESSIONAL CAMPAIGN	Transaction ID: SB23.6588 Date of Disbursement
	Mailing Address PO BOX 16128	<input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City HOUSTON State TX Zip Code 77222	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="2000.00"/>
	Candidate Name RAYMOND E. 'GENE' GREEN	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 29	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS	Transaction ID: SB23.6534 Date of Disbursement
	Mailing Address 7905 MALCOLM ROAD SUITE 102	<input type="text" value="09"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="08"/>
	City CLINTON State MD Zip Code 20735	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name STENY HAMILTON HOYER	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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 63 / 69

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN D. DINGELL FOR CONGRESS COMMITTEE	Transaction ID: SB23.6495 Date of Disbursement																			
	Mailing Address 607 14th Street N.W. Suite 800	<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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name JOHN D DINGELL	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 15	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) JOHN SHADEGGS FRIENDS	Transaction ID: SB23.6546 Date of Disbursement																			
	Mailing Address PO BOX 45444	<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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
	City Phoenix State AZ Zip Code 85064	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JOHN B. SHADEGG	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) LARSON FOR CONGRESS	Transaction ID: SB23.6499 Date of Disbursement																			
	Mailing Address 29 RUFF CIRCLE	<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>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
	City GLASTONBURY State CT Zip Code 06033	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JOHN B LARSON	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional) ►

4000.00

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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE</p> <p>Mailing Address RIVERFRONT PLAZA STATION PO BOX 200596</p> <p>City NEWARK State NJ Zip Code 07102</p> <p>Purpose of Disbursement Contribution Contribution 011 Category/ Type</p> <p>Candidate Name FRANK R LAUTENBERG</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NJ District: 00</p>	<p>Transaction ID: SB23.6627 Date of Disbursement <table border="1" style="width: 100%;"> <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>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">1000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	5	/	2	0	0	8	1000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	2	5	/	2	0	0	8													
1000.00																						
<p>B. Full Name (Last, First, Middle Initial) MARK PRYOR FOR US SENATE</p> <p>Mailing Address PO BOX 2720</p> <p>City LITTLE ROCK State AR Zip Code 72203</p> <p>Purpose of Disbursement Contribution Contribution 011 Category/ Type</p> <p>Candidate Name MARK LUNSFORD PRYOR</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: AR District: 00</p>	<p>Transaction ID: SB23.6624 Date of Disbursement <table border="1" style="width: 100%;"> <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>2</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	5	/	2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	2	5	/	2	0	0	8													
2000.00																						
<p>C. Full Name (Last, First, Middle Initial) MCCONNELL SENATE COMMITTEE '08</p> <p>Mailing Address PO BOX 1496</p> <p>City LOUISVILLE State KY Zip Code 40201</p> <p>Purpose of Disbursement Contribution Contribution 011 Category/ Type</p> <p>Candidate Name MITCH MCCONNELL</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: KY District: 00</p>	<p>Transaction ID: SB23.6550 Date of Disbursement <table border="1" style="width: 100%;"> <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>1</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period <table border="1" style="width: 100%;"> <tr> <td style="text-align: center;">2000.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	5	/	2	0	0	8	2000.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	9	/	1	5	/	2	0	0	8													
2000.00																						

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MICA FOR CONGRESS	Transaction ID: SB23.6556 Date of Disbursement																			
	Mailing Address P. O. Box 181546	<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>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	5		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	5		2	0	0	8												
	City Casselberry State FL Zip Code 32718	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JOHN L MR. MICA	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) MICHAEL BURGESS FOR CONGRESS	Transaction ID: SB23.6488 Date of Disbursement																			
	Mailing Address PO Box 2334	<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>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	1		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	1		2	0	0	8												
	City Denton State TX Zip Code 76202	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name MICHAEL C DR BURGESS	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 26	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) NATIONAL LEADERSHIP PAC	Transaction ID: SB23.6585 Date of Disbursement																			
	Mailing Address PO box 5577	<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>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9		1	8		2	0	0	8												
	City New York State NY Zip Code 10027	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name NATIONAL LEADERSHIP PAC	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

**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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. NORM DICKS FOR CONGRESS

Full Name (Last, First, Middle Initial)

NORM DICKS FOR CONGRESS

Mailing Address PO Box 1663

City Tacoma State WA Zip Code 98401

Purpose of Disbursement Contribution

011
Category/
Type

Candidate Name
NORMAN D DICKS

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: WA District: 06

Transaction ID: SB23.6579

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

B. PALLONE FOR CONGRESS

Full Name (Last, First, Middle Initial)

PALLONE FOR CONGRESS

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement Contribution

011
Category/
Type

Candidate Name
FRANK JR. PALLONE

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 06

Transaction ID: SB23.6540

Date of Disbursement

09 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

C. PEOPLE FOR ENGLISH

Full Name (Last, First, Middle Initial)

PEOPLE FOR ENGLISH

Mailing Address PO BOX 1940

City ERIE State PA Zip Code 16507

Purpose of Disbursement Contribution

011
Category/
Type

Candidate Name
PHILIP S. ENGLISH

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 03

Transaction ID: SB23.6565

Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

3000.00

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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
RICHARD E NEAL FOR CONGRESS COMMITTEE

Mailing Address 76 MAGNOLIA TERRACE

City SPRINGFIELD State MA Zip Code 01108

Purpose of Disbursement
Contribution

Candidate Name
RICHARD E MR. NEAL

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

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.6523
Date of Disbursement

09 / 11 / 2008

Amount of Each Disbursement this Period

2000.00

B. Full Name (Last, First, Middle Initial)
STEVE ISRAEL FOR CONGRESS COMMITTEE

Mailing Address PO Box 777

City Deer Park State NY Zip Code 11729

Purpose of Disbursement
Contribution

Candidate Name
STEVE J ISRAEL

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

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.6582
Date of Disbursement

09 / 18 / 2008

Amount of Each Disbursement this Period

2000.00

C. Full Name (Last, First, Middle Initial)
TEXANS FOR SENATOR JOHN CORNYN INC

Mailing Address 6850 AUSTIN CENTRE BLVD
SUITE 180

City AUSTIN State TX Zip Code 78731

Purpose of Disbursement
Contribution

Candidate Name
JOHN CORNYN

Office Sought: House
 Senate
 President
State: TX District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

011
Category/
Type

Transaction ID: SB23.6487
Date of Disbursement

09 / 08 / 2008

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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)

<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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) UPTON FOR ALL OF US</p> <p>Mailing Address P.O. Box 490</p> <p>City St. Joseph State MI Zip Code 49085</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name FREDERICK STEPHEN UPTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6562</p> <p>Date of Disbursement 09 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) VAN HOLLEN FOR CONGRESS</p> <p>Mailing Address 10537 St. Paul Street</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name CHRIS VAN HOLLEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6514</p> <p>Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) VAN HOLLEN FOR CONGRESS</p> <p>Mailing Address 10537 St. Paul Street</p> <p>City Kensington State MD Zip Code 20895</p> <p>Purpose of Disbursement Contribution 011 Category/Type</p> <p>Candidate Name CHRIS VAN HOLLEN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.6529</p> <p>Date of Disbursement 09 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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)
SAFETY-KLEEN INC. POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) WALLY HERGER FOR CONGRESS COMMITTEE <hr/> Mailing Address P.O. Box 1500 <hr/> City Chico State CA Zip Code 95927 <hr/> Purpose of Disbursement Contribution Candidate Name WALLY HERGER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6491 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type 011
B. Full Name (Last, First, Middle Initial) WYDEN FOR SENATE <hr/> Mailing Address PO BOX 3498 <hr/> City PORTLAND State OR Zip Code 97208 <hr/> Purpose of Disbursement Contribution Candidate Name RONALD LEE WYDEN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 00 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.6628 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00 Category/Type 011

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

62300.00