

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

Service Employees International Union PEA - Federal

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2012"/>	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="0.00"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="7069915.80"/>	<input type="text" value="7619915.80"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7069915.80"/>	<input type="text" value="7619915.80"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="4771316.67"/>	<input type="text" value="5321316.67"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="2298599.13"/>	<input type="text" value="2298599.13"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="5271078.24"/>	

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

Service Employees International Union PEA - Federal

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	7069915.80	7619915.80
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	7069915.80	7619915.80
(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)	7069915.80	7619915.80
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	7069915.80	7619915.80
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	7069915.80	7619915.80

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	424520.00	424520.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	424520.00	424520.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2004139.50	2554139.50
24. Independent Expenditures (use Schedule E)	1913579.42	1913579.42
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	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	429077.75	429077.75
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4771316.67	5321316.67
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4771316.67	5321316.67

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	7069915.80	7619915.80
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	7069915.80	7619915.80
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	424520.00	424520.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	424520.00	424520.00

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

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

FOR LINE NUMBER:
(check only one)

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

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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. Minnesota State Council

Mailing Address 2233 University Avenue Suite 422

City State Zip Code
Saint Paul MN 55114

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297987

Amount of Each Disbursement this Period

26677.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. One Pennsylvania

Mailing Address 1500 North Second Street, Suite 11

City State Zip Code
Harrisburg PA 17102

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D298040

Amount of Each Disbursement this Period

19605.00

Category/
Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. Our DC

Mailing Address 1800 Massachusetts Ave NW

City State Zip Code
Washington DC 20036

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297983

Amount of Each Disbursement this Period

14063.00

Category/
Type

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

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

40740.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. Our DC

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D297984

Amount of Each Disbursement this Period

4	5	4	5	3	.	0	0
---	---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Debt Payment for Salary & Canvass-Related Expenses

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D297315

Amount of Each Disbursement this Period

1	4	3	6	6	.	1	6
---	---	---	---	---	---	---	---

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SEIU Healthcare Wisconsin

Mailing Address 4513 Vernon Blvd Suite 300

City Madison State WI Zip Code 53705

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Date of Disbursement

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

Transaction ID : D298019

Amount of Each Disbursement this Period

2	1	7	5	1	.	0	0
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[MEMO ITEM]

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

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

0	0	0	0	0	.	0	0
---	---	---	---	---	---	---	---

0	0	0	0	0	.	0	0
---	---	---	---	---	---	---	---

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. SEIU IL State Council

Mailing Address 111 E Wacker

City Chicago State IL Zip Code 60601

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297970

Amount of Each Disbursement this Period

50005.00

Category/Type

Full Name (Last, First, Middle Initial)

B. SEIU Local 1199 WOK

Mailing Address 1395 Dublin Road

City Columbus State OH Zip Code 43215

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297978

Amount of Each Disbursement this Period

14907.00

Category/Type

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SEIU Local 32BJ

Mailing Address 101 Avenue of the America's

City New York State NY Zip Code 10013

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President

State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
09 / 24 / 2012

Transaction ID : D298062

Amount of Each Disbursement this Period

125000.00

Category/Type

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

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

175005.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. SEIU Local 3

Mailing Address 4 Bunker Hill Industrial Park

City Boston State MA Zip Code 02129

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297932

Amount of Each Disbursement this Period

103507.00

Full Name (Last, First, Middle Initial)

B. SEIU Local 3

Mailing Address 4 Bunker Hill Industrial Park

City Boston State MA Zip Code 02129

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D297934

Amount of Each Disbursement this Period

22595.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. United for New York, Inc.

Mailing Address 330 W 42nd Street, Suite 900

City New York State NY Zip Code 10036

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D298025

Amount of Each Disbursement this Period

105268.00

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

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

208775.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. United for New York, Inc.

Mailing Address 330 W 42nd Street, Suite 900

City New York State NY Zip Code 10036

Purpose of Disbursement
Voter Outreach Activities (Non-Express Advocacy)

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
09 / 06 / 2012

Transaction ID : D298026

Amount of Each Disbursement this Period

11101.00

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

0.00

424520.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. America Votes

Mailing Address 1401 New York Avenue Suites 720

City Washington State DC Zip Code 20005

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
09			21			2012			

Transaction ID : D297309

Amount of Each Disbursement this Period

250000.00

Full Name (Last, First, Middle Initial)

B. FLORIDA FREEDOM PAC

Mailing Address 8330 BISCAYNE BLVD SUITE 1

City MIAMI State FL Zip Code 33138

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
07			13			2012			

Transaction ID : D297306

Amount of Each Disbursement this Period

544029.50

Full Name (Last, First, Middle Initial)

C. FLORIDA FREEDOM PAC

Mailing Address 8330 BISCAYNE BLVD SUITE 1

City MIAMI State FL Zip Code 33138

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
08			10			2012			

Transaction ID : D297307

Amount of Each Disbursement this Period

745131.00

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

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

1539160.50

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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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. FLORIDA FREEDOM PAC

Mailing Address 8330 BISCAYNE BLVD SUITE 1

City MIAMI State FL Zip Code 33138

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : D297308

Amount of Each Disbursement this Period

464979.00

Full Name (Last, First, Middle Initial)

B. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution for salary and other canvass-related expenses from 7/29-8/31

Candidate Name

FLORIDA FREEDOM PAC

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
07 / 29 / 2012

Transaction ID : D297593

Amount of Each Disbursement this Period

458336.99

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Contribution for salary and other canvass-related expenses from 9/1-9/30

Candidate Name

FLORIDA FREEDOM PAC

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 01 / 2012

Transaction ID : D297594

Amount of Each Disbursement this Period

345995.52

[MEMO ITEM]

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

464979.00

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

2004139.50

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. GRSC Consulting

Mailing Address 2828 University Ave SE, #150

City Minneapolis State MN Zip Code 55414

Purpose of Disbursement
Payment for Non-Federal Canvass Services

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
08 / 24 / 2012

Transaction ID : D297921

Amount of Each Disbursement this Period

64855.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. Montana Democratic Party Non-Federal Account

Mailing Address PO Box 802

City Helena State MT Zip Code 59624

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 10 / 2012

Transaction ID : D297923

Amount of Each Disbursement this Period

250000.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. The Strategy Group

Mailing Address 1606 20th Street, NW
Floor 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Direct Mail Supporting Non-Federal Candidates

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2012

Transaction ID : D297989

Amount of Each Disbursement this Period

12835.51

Category/
Type

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

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

327690.51

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

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

FOR LINE NUMBER:
(check only one)

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

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

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. The Strategy Group

Mailing Address 1606 20th Street, NW
Floor 3

City Washington State DC Zip Code 20009

Purpose of Disbursement
Direct Mail Supporting Non-Federal Candidates

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 20 / 2012

Transaction ID : D297990

Amount of Each Disbursement this Period

13752.24

Full Name (Last, First, Middle Initial)

B. United for New York, Inc.

Mailing Address 330 W 42nd Street, Suite 900

City New York State NY Zip Code 10036

Purpose of Disbursement
Payment for Non-Federal Canvass Activities

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 06 / 2012

Transaction ID : D298024

Amount of Each Disbursement this Period

52635.00

Full Name (Last, First, Middle Initial)

C. Washington State Council SEIU

Mailing Address 3161 Elliott Ave
Ste 300

City Seattle State WA Zip Code 98121

Purpose of Disbursement
Non-Federal Contribution

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
09 / 12 / 2012

Transaction ID : D297922

Amount of Each Disbursement this Period

35000.00

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

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

101387.24

429077.75

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 15 OF 70
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor One Pennsylvania	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 1500 North Second Street, Suite 11	
City State Zip Code Harrisburg PA 17102	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D298042	
Amount Incurred This Period 19605.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 19605.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Our DC	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 1800 Massachusetts Ave NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D297985	
Amount Incurred This Period 45453.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 45453.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SEIU General Fund	Nature of Debt (Purpose): Est. payment for salary and other canvass-related expenses from 6/20-9/30, bird-dogging & rallies
Mailing Address 1800 Massachusetts Ave NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 143661.66	Transaction ID : D285704	
Amount Incurred This Period 517139.91	Payment This Period 143661.66	Outstanding Balance at Close of This Period 517139.91

1) SUBTOTALS This Period This Page (optional)..... ▶	582197.91
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 16 OF 70
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SEIU General Fund	Nature of Debt (Purpose): Salary and other canvass-related expenses from 6/11-9/30
Mailing Address 1800 Massachusetts Ave NW	
City State Zip Code Washington DC 20036	

Outstanding Balance Beginning This Period 596003.09	Transaction ID : D286612	
Amount Incurred This Period 4022523.24	Payment This Period 0.00	Outstanding Balance at Close of This Period 4618526.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor SEIU Healthcare Wisconsin	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 4513 Vernon Blvd Suite 300	
City State Zip Code Madison WI 53705	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D298020	
Amount Incurred This Period 21751.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 21751.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor SEIU Local 1199 WOK	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 1395 Dublin Road	
City State Zip Code Columbus OH 43215	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D297979	
Amount Incurred This Period 14907.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 14907.00

1) SUBTOTALS This Period This Page (optional)..... ▶	4655184.33
2) TOTALS This Period (last page this line number only)..... ▶	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	

SCHEDULE D (FEC Form 3X)

DEBTS AND OBLIGATIONS

Excluding Loans

(Use separate schedule(s) for each numbered line)	PAGE 17 OF 70
	FOR LINE NUMBER: (check only one) <input type="checkbox"/> 9 <input checked="" type="checkbox"/> 10

NAME OF COMMITTEE (In Full)
Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor SEIU Local 3	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 4 Bunker Hill Industrial Park	
City State Zip Code Boston MA 02129	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D297935	
Amount Incurred This Period 22595.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 22595.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor United for New York, Inc.	Nature of Debt (Purpose): Voter Outreach Activities (Non-Express Advocacy)
Mailing Address 330 W 42nd Street, Suite 900	
City State Zip Code New York NY 10036	

Outstanding Balance Beginning This Period 0.00	Transaction ID : D298028	
Amount Incurred This Period 11101.00	Payment This Period 0.00	Outstanding Balance at Close of This Period 11101.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor	Nature of Debt (Purpose):
Mailing Address	
City State Zip Code	

Outstanding Balance Beginning This Period		
Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period

1) SUBTOTALS This Period This Page (optional)..... ▶	33696.00
2) TOTALS This Period (last page this line number only)..... ▶	5271078.24
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ▶	0.00
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶	5271078.24

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 12587.49
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D284113

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 5643.84
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 302703.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D284114

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	18231.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 56030.80
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Transaction ID : D284115
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 412741.92		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 5643.84
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Transaction ID : D284116
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 176925.82		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	61674.64
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 16270.84
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Transaction ID : D284117
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 185901.37		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 07 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 180826.28
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/1-7/28	Category/Type 001	Transaction ID : D284118
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	197097.12
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date MM / DD / YYYY 07 / 29 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 25040.10	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/29-8/31	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D288516

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date MM / DD / YYYY 07 / 29 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 15538.95	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/29-8/31	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 302703.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	

Transaction ID : D288517

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 07 / 29 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 1490.83
City Washington State DC Zip Code 20036	Transaction ID : D288522	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/29-8/31	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE PACE II		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 19930.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 07 / 29 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 331119.24
City Washington State DC Zip Code 20036	Transaction ID : D288523	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 7/29-8/31	Category/Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y 08 / 30 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 103361.80
City Washington	State DC	
Zip Code 20036	Transaction ID : D291138	
Purpose of Expenditure Rally Activities	Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 40977.00
City Washington	State DC	
Zip Code 20036	Transaction ID : D291107	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M / D D / Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 128380.40
City Washington State DC Zip Code 20036	Transaction ID : D291108	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 302703.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 50746.80
City Washington State DC Zip Code 20036	Transaction ID : D291109	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 412741.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 8758.73
City Washington State DC Zip Code 20036	Transaction ID : D291111	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 185901.37		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 2602.40
City Washington State DC Zip Code 20036	Transaction ID : D291116	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 176925.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 8758.73
City Washington State DC Zip Code 20036	Transaction ID : D291117	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>06</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 185901.37		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 25434.53
City Washington State DC Zip Code 20036	Transaction ID : D291118	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input type="checkbox"/> House State: <u>VA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 179232.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 305494.08
City Washington State DC Zip Code 20036	Transaction ID : D291119	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought 3024471.00		2012

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 8780.70
City Washington State DC Zip Code 20036	Transaction ID : D291120	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 03 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE PACE II		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Calendar Year-To-Date Per Election for Office Sought 19930.78		2012

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 09 / 01 / 2012
[MEMO ITEM] Mailing Address 1800 Massachusetts Ave NW		Amount 12747.83
City Washington	State DC	
Zip Code 20036	Transaction ID : D291121	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/1-9/16	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL ODELL HIRSCHBIEL JR		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73380.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2012
Mailing Address 4 Bunker Hill Industrial Park		Amount 12938.00
City Boston	State MA	
Zip Code 02129	Transaction ID : D291946	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	12938.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 4 Bunker Hill Industrial Park		Amount 1294.00
City Boston	State MA	Zip Code 02129
Purpose of Expenditure Payment for direct mail	Category/ Type 006	Transaction ID : D291948
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 111 E Wacker		Amount 72006.00
City Chicago	State IL	Zip Code 60601
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/ Type 001	Transaction ID : D291955
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	73300.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council		Date M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2012
Mailing Address 111 E Wacker		Amount 38003.00
City Chicago	State IL	
Zip Code 60601	Transaction ID : D291956	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2012
Mailing Address 1395 Dublin Road		Amount 39727.00
City Columbus	State OH	
Zip Code 43215	Transaction ID : D291957	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	77730.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 1395 Dublin Road		Amount 38682.00
City Columbus	State OH	Zip Code 43215
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D291958

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 1395 Dublin Road		Amount 10455.00
City Columbus	State OH	Zip Code 43215
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30		Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15682.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D291959

(a) SUBTOTAL of Itemized Independent Expenditures.....	49137.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

[Electronically Filed]

Date

MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 73573.00
City Madison	State WI	
Zip Code 53705	Transaction ID : D291965	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 71820.00
City Madison	State WI	
Zip Code 53705	Transaction ID : D291968	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	145393.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date **10 / 15 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 1752.00
City Madison	State WI	Zip Code 53705
Purpose of Expenditure Payment for direct mail	Category/ Type 006	Transaction ID : D291969
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 1752.00
City Madison	State WI	Zip Code 53705
Purpose of Expenditure Payment for direct mail	Category/ Type 006	Transaction ID : D291970
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	3504.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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Signature

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10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2012
Mailing Address 1500 North Second Street, Suite 11		Amount 76491.00
City Harrisburg State PA Zip Code 17102	Transaction ID : D291978	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M M / D D D / Y Y Y Y Y Y 09 / 06 / 2012
Mailing Address 1500 North Second Street, Suite 11		Amount 73084.00
City Harrisburg State PA Zip Code 17102	Transaction ID : D291979	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	149575.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 333 41st Street, Suite 901		Amount 35493.00
City Miami Beach	State FL	
Zip Code 33140	Transaction ID : D291981	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 333 41st Street, Suite 901		Amount 7819.00
City Miami Beach	State FL	
Zip Code 33140	Transaction ID : D291982	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	43312.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date **10 / 15 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 333 41st Street, Suite 901		Amount 4887.00
City Miami Beach	State Zip Code FL 33140	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Transaction ID : D291985
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Office Sought: <input type="checkbox"/> House State: FL <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 4887.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 333 41st Street, Suite 901		Amount 4887.00
City Miami Beach	State Zip Code FL 33140	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Transaction ID : D291986
Name of Federal Candidate Supported or Opposed by Expenditure: JOSE ANTONIO GARCIA		Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 26 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 4887.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	9774.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina [Electronically Filed] Date **10 / 15 / 2012**

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 17280.00
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 9/6-9/30	Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 179232.22		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D297966

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 09 / 06 / 2012
Mailing Address 1500 North Second Street, Suite 11		Amount 2272.00
City Harrisburg	State PA	Zip Code 17102
Purpose of Expenditure T-Shirts & Buttons	Category/Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D298038

(a) SUBTOTAL of Itemized Independent Expenditures.....	19552.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina
Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 09 / 07 / 2012
Mailing Address 4 Bunker Hill Industrial Park		Amount 11645.00
City Boston	State MA	Zip Code 02129
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D291947
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee Our DC		Date MM / DD / YYYY 09 / 07 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 14064.00
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D291962
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	25709.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina
Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY 09 / 07 / 2012
Mailing Address 1500 North Second Street, Suite 11		Amount 5679.00
City Harrisburg	State PA	Zip Code 17102
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D291980
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY 09 / 07 / 2012
Mailing Address 333 41st Street, Suite 901		Amount 1955.00
City Miami Beach	State FL	Zip Code 33140
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D291983
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	7634.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Eliseo Medina
Signature

[Electronically Filed] Date **10 / 15 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 07 / 2012</div>
Mailing Address 333 41st Street, Suite 901		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">1955.00</div>
City Miami Beach	State FL	
Zip Code 33140	Transaction ID : D291984	
Purpose of Expenditure Payment for rally expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">3024471.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 07 / 2012</div>
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">6400.00</div>
City Washington	State DC	
Zip Code 20036	Transaction ID : D297962	
Purpose of Expenditure Payment for rally expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">3024471.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">8355.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>

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Eliseo Medina

Signature _____ [Electronically Filed] Date

10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date M M / D D / Y Y Y Y Y Y 09 / 12 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4087.34
City Madison State WI Zip Code 53705	Transaction ID : D292965	
Purpose of Expenditure Payment for rally expenses	Category/Type 007	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 98507.33
City Washington State DC Zip Code 20036	Transaction ID : D292948	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/Type 001	Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4087.34
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 147302.83
City Washington State DC Zip Code 20036	Transaction ID : D292949	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/Type 001	Office Sought: <input type="checkbox"/> House State: NV <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 302703.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 124465.89
City Washington State DC Zip Code 20036	Transaction ID : D292950	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 412741.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 17 / 2012</div>
[MEMO ITEM]		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">49495.92</div>
Mailing Address 1800 Massachusetts Ave NW		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">185901.37</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D292951

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 17 / 2012</div>
[MEMO ITEM]		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">147302.83</div>
Mailing Address 1800 Massachusetts Ave NW		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">176925.82</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D292952

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;"> </div>

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Eliseo Medina

Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 136517.69
City Washington State DC Zip Code 20036	Transaction ID : D292953	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/Type 001	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 179232.22	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 17 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 49495.92
City Washington State DC Zip Code 20036	Transaction ID : D292954	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 185901.37	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina **[Electronically Filed]** Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y Y Y 09 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 743325.87	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : D292955

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y Y Y 09 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 9659.25	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>03</u> <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE PACE II		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 19930.78		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Transaction ID : D292956

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M / D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 09 / 17 / 2012
[MEMO ITEM] Mailing Address 1800 Massachusetts Ave NW		Amount 48579.90
City Washington	State DC	
Zip Code 20036	Transaction ID : D292957	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 9/17-10/5	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: VA <input type="checkbox"/> Senate District: 02 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL ODELL HIRSCHBIEL JR		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 73380.51		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee Terra Strategies, LLC		Date M M M / D D D / Y Y Y Y Y Y 09 / 18 / 2012
Mailing Address 100 East Grand Ave. Suite 380		Amount 106857.16
City Des Moines	State IA	
Zip Code 50309	Transaction ID : D292967	
Purpose of Expenditure Payment for Canvassing Services Beginning on 9/18	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 120927.52		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	106857.16
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee GRSC Consulting		Date MM / DD / YYYY 09 / 18 / 2012
Mailing Address 2828 University Ave SE, #150		Amount 231813.00
City Minneapolis	State MN	
Zip Code 55414	Transaction ID : D297746	
Purpose of Expenditure Payment for Canvass Services Starting on 9/18	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee GRSC Consulting		Date MM / DD / YYYY 09 / 19 / 2012
Mailing Address 2828 University Ave SE, #150		Amount 115906.50
City Minneapolis	State MN	
Zip Code 55414	Transaction ID : D292971	
Purpose of Expenditure Payment for Canvassing Services Beginning on 9/19	Category/ Type	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	347719.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date **10 / 15 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date MM / DD / YYYY 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 7508.18
City Washington	State DC	
Zip Code 20036	Transaction ID : D293216	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date MM / DD / YYYY 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 10747.40
City Washington	State DC	
Zip Code 20036	Transaction ID : D293217	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RODNEY DAVIS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 10747.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
[Electronically Filed]
Date

Signature MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 22 / 2012</div>
[MEMO ITEM]		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">14070.36</div>
Mailing Address 1800 Massachusetts Ave NW		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 17 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">120927.52</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D293218

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">09 / 22 / 2012</div>
[MEMO ITEM]		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">12000.00</div>
Mailing Address 1800 Massachusetts Ave NW		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: MN <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J. CRAVAACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px; text-align: right;">12000.00</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Transaction ID : D293219

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block; width: 100px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature [Electronically Filed] Date MM / DD / YYYY
10 15 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 11128.24
City Washington	State DC	
Zip Code 20036	Transaction ID : D293220	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 11128.24		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 11128.24
City Washington	State DC	
Zip Code 20036	Transaction ID : D293221	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 180200.43		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 8676.77
City Washington State DC Zip Code 20036	Transaction ID : D293224	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 8676.77		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 6019.36
City Washington State DC Zip Code 20036	Transaction ID : D293225	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 6019.36		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full)
Service Employees International Union PEA - Federal
FEC IDENTIFICATION NUMBER
C C00523621
Check if 24-hour report 48-hour report New report Amends report filed on

Full Name (Last, First, Middle Initial) of Payee
SEIU General Fund
[MEMO ITEM]
Mailing Address 1800 Massachusetts Ave NW
City Washington State DC Zip Code 20036
Purpose of Expenditure
Canvass, Bird-dogging & Rallies
Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure:
MICHAEL COFFMAN
Calendar Year-To-Date Per Election for Office Sought 185901.37

Date 09 / 22 / 2012
Amount 8525.76
Transaction ID : D293226
Office Sought: [X] House State: CO
Senate District: 06
President
Check One: [] Support [X] Oppose
Disbursement For: [] Primary [X] General
2012 [] Other (specify)

Full Name (Last, First, Middle Initial) of Payee
SEIU General Fund
[MEMO ITEM]
Mailing Address 1800 Massachusetts Ave NW
City Washington State DC Zip Code 20036
Purpose of Expenditure
Canvass, Bird-dogging & Rallies
Category/Type 001
Name of Federal Candidate Supported or Opposed by Expenditure:
C W BILL YOUNG
Calendar Year-To-Date Per Election for Office Sought 6540.75

Date 09 / 22 / 2012
Amount 6540.75
Transaction ID : D293227
Office Sought: [X] House State: FL
Senate District: 13
President
Check One: [] Support [X] Oppose
Disbursement For: [] Primary [X] General
2012 [] Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures..... 0.00
(b) SUBTOTAL of Unitemized Independent Expenditures
(c) TOTAL Independent Expenditures.....

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.
Eliseo Medina [Electronically Filed] Date 10 / 15 / 2012
Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 9177.40
City Washington State DC Zip Code 20036	Transaction ID : D293228	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CA <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 9177.40		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M M / D D D / Y Y Y Y Y Y 09 / 22 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 7458.01
City Washington State DC Zip Code 20036	Transaction ID : D293231	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN B WEST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 7458.01		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 22 / 2012
[MEMO ITEM]		Amount 16000.00
Mailing Address 1800 Massachusetts Ave NW		
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Transaction ID : D293233
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 16000.00		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 22 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4671.33
City Madison	State WI	
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D293237
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	4671.33
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 22 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4087.33
City Madison	State WI	Zip Code 53705
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D293240

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 09 / 24 / 2012
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4671.33
City Madison	State WI	Zip Code 53705
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Transaction ID : D293238

(a) SUBTOTAL of Itemized Independent Expenditures.....	8758.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date M M M / D D D / Y Y Y Y Y Y 09 / 24 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4087.33	
City Madison	State WI	Zip Code 53705	Transaction ID : D293239
Purpose of Expenditure Payment for rally expenses	Category/Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee ProgressOhio.org		Date M M M / D D D / Y Y Y Y Y Y 09 / 25 / 2012	
Mailing Address 172 E. State Street, 6th Floor		Amount 62500.00	
City Columbus	State OH	Zip Code 43215	Transaction ID : D293437
Purpose of Expenditure Canvass Activities	Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President	State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	66587.33
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures.....	_____

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee ProgressOhio.org		Date MM / DD / YYYY 09 / 25 / 2012
Mailing Address 172 E. State Street, 6th Floor		Amount 62500.00
City Columbus	State OH	Zip Code 43215
Purpose of Expenditure Canvass Activities	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 412741.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D293439

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council		Date MM / DD / YYYY 09 / 25 / 2012
Mailing Address 111 E Wacker		Amount 40004.00
City Chicago	State IL	Zip Code 60601
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Transaction ID : D293440

(a) SUBTOTAL of Itemized Independent Expenditures.....	102504.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date **10 / 15 / 2012**

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date MM / DD / YYYY 09 / 26 / 2012
Mailing Address 1395 Dublin Road		Amount 5227.00
City Columbus	State OH	
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D293441
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date MM / DD / YYYY 09 / 26 / 2012
Mailing Address 1395 Dublin Road		Amount 5227.00
City Columbus	State OH	
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Transaction ID : D293442
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures.....	10454.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature

[Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date M M M / D D D / Y Y Y Y Y Y 09 / 26 / 2012
Mailing Address 1395 Dublin Road		Amount 5227.00
City Columbus	State OH	
Zip Code 43215	Transaction ID : D293443	
Purpose of Expenditure Payment for rally expenses	Category/ Type 007	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 16 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 15682.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M M / D D D / Y Y Y Y Y Y 09 / 28 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 97925.53
City Washington	State DC	
Zip Code 20036	Transaction ID : D297317	
Purpose of Expenditure Payment for salary and other canvass-related expenses from 6/20-6/30 as disclosed on 7/15 Report	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3024471.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	103152.53
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y
10 / 15 / 2012

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 16280.92
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 6/20-6/30 as disclosed on 7/15 Report	Category/Type 001	Office Sought: <input type="checkbox"/> House State: <u>WI</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 333510.76		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D297322

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 2918.90
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 6/20-6/30 as disclosed on 7/15 Report	Category/Type 001	Office Sought: <input type="checkbox"/> House State: <u>NV</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 302703.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D297325

(a) SUBTOTAL of Itemized Independent Expenditures.....	19199.82
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
Signature [Electronically Filed] Date MM / DD / YYYY
10 / 15 / 2012

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal	FEC IDENTIFICATION NUMBER ▼ C C00523621
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 17032.55
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 6/20-6/30 as disclosed on 7/15 Report	Category/Type 001	Office Sought: <input type="checkbox"/> House State: OH <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 412741.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D297327

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 09 / 28 / 2012
Mailing Address 1800 Massachusetts Ave NW		Amount 2918.90
City Washington	State DC	Zip Code 20036
Purpose of Expenditure Payment for salary and other canvass-related expenses from 6/20-6/30 as disclosed on 7/15 Report	Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NV <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 176925.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Transaction ID : D297328

(a) SUBTOTAL of Itemized Independent Expenditures.....	19951.45
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature _____ [Electronically Filed] Date MM / DD / YYYY **10 / 15 / 2012**

