

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
American Maritime Officers Voluntary Political Action Fund

ADDRESS (number and street) 2 West Dixie Highway  
Dania Beach FL 33004  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00027532  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2008 through 05 31 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Jose Leonard  
Signature of Treasurer Electronically Filed by Jose Leonard Date 07 16 2008

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		5867.27
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	46867.55									
(c) Total Receipts (from Line 19) .....	30053.17	234284.75								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	76920.72	240152.02								
7. Total Disbursements (from Line 31) .....	41400.00	204631.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	35520.72	35520.72								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	10606.00	85022.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	19406.00	146949.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	30012.00	231971.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	30012.00	231971.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	222.55
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	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	41.17	91.20
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	30053.17	234284.75
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	30053.17	234284.75

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	222.55
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	40500.00	202800.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	900.00	1500.00
(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)) .....	900.00	1500.00
29. Other Disbursements.....	0.00	108.75
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	41400.00	204631.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	41400.00	204631.30

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	30012.00	231971.00
34. Total Contribution Refunds (from Line 28(d)) .....	900.00	1500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	29112.00	230471.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) KENNETH BAGLEY		Date of Receipt	
	Mailing Address 3355 HOLLY SPRINGS RD.		M M / D D / Y Y Y Y Y 0 5 / 2 3 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.48412
	MELBOURNE	FL	32934	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		300.00	
	Name of Employer PACIFIC GULF MARINE, INC.		Occupation MASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN BELLINGER		Date of Receipt	
	Mailing Address 834 LOUISA STREET		M M / D D / Y Y Y Y Y 0 5 / 0 2 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.48255
	NEW ORLEANS	LA	70117	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		400.00	
	Name of Employer PRONAV SHIP MANAGEMENT, INC.		Occupation THIRD MATE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) CHARLES CASHMAN		Date of Receipt	
	Mailing Address 757 SE 17TH STREET # 830		M M / D D / Y Y Y Y Y 0 5 / 1 3 / 2 0 0 8	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.48329
	FORT LAUDERDALE	FL	33316	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		500.00	
	Name of Employer MAERSK LINE LTD		Occupation Chief Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) ROBERT CHERAMIE	Date of Receipt MM / DD / YYYY 05 / 22 / 2008
	Mailing Address 508 AVE E	<b>Transaction ID:</b> SA11AI.48407
	City State Zip Code KENTWOOD LA 70444	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer AMERICAN OVERSEAS MARINE	Occupation Chief Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) GREGORY DERRY	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address PMB 267 PO BOX 1200	<b>Transaction ID:</b> SA11AI.48345
	City State Zip Code ALPENA MI 49707	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) KENNETH DONAHUE	Date of Receipt MM / DD / YYYY 05 / 23 / 2008
	Mailing Address 105 ALBERTA DR	<b>Transaction ID:</b> SA11AI.48410
	City State Zip Code OZARK AL 36360	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 25
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN DUNN JR.	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 9952 El Nopal	<b>Transaction ID:</b> SA11AI.48351
	City State Zip Code Santee CA 92071	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Various Shipping Companies Occupation Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) MOHAMED ELJAHMI	Date of Receipt MM / DD / YYYY 05 / 02 / 2008
	Mailing Address PO BOX 4082	<b>Transaction ID:</b> SA11AI.48257
	City State Zip Code DEARBORN MI 48126	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer TRANSOCEANIC CABLE SHIP Occupation 3rd Asst Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) THEODORE ELMENDORF	Date of Receipt MM / DD / YYYY 05 / 29 / 2008
	Mailing Address 16 SUMMIT DRIVE	<b>Transaction ID:</b> SA11AI.48450
	City State Zip Code PERU NY 12972	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

**A.**

Full Name (Last, First, Middle Initial)  
TIMOTHY ENGLISH

Mailing Address 329 SCRUTON POND RD.

City State Zip Code  
BARRINGTON NH 03825

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.48394

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL FARADAY

Mailing Address P.O. BOX 113

City State Zip Code  
KINGFIELD ME 04947

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.48363

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)  
JAMES M FERNANDEZ JR

Mailing Address 14911 HARVRENEE DRIVE

City State Zip Code  
CYPRESS TX 77429

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

Name of Employer MAERSK LINE LTD Occupation 1st Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.48371

Amount of Each Receipt this Period

1000.00

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

1800.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) ROY GRAHAM	Date of Receipt MM / DD / YYYY 05 / 13 / 2008
	Mailing Address 3221 ROSELAND RD	<b>Transaction ID:</b> SA11AI.48326
	City State Zip Code KING GEORGE VA 22485	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES GREEN	Date of Receipt MM / DD / YYYY 05 / 15 / 2008
	Mailing Address 7721 POITEVENT AVE	<b>Transaction ID:</b> SA11AI.48347
	City State Zip Code NEW ORLEANS LA 70127	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SEALIFT, INC. Chief Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MATTHEW GROSE	Date of Receipt MM / DD / YYYY 05 / 08 / 2008
	Mailing Address 45 THEODORE DR	<b>Transaction ID:</b> SA11AI.48300
	City State Zip Code BRUNSWICK ME 04011	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation OSPREY SHIP MGMT, INC. 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	850.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)

Frederick KEYES Jr.

Mailing Address 162 SANDRA LANE

City State Zip Code  
NORTH ANDOVER MA 01845

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.48372

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

GREGORY MAXWELL

Mailing Address 20 Edwards Street

City State Zip Code  
South Portland ME 04106

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

Name of Employer Occupation  
USS TRANSPORT, LLC Master

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.48308

Amount of Each Receipt this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

STEPHEN MC CORMICK

Mailing Address 421 SW 75th Terrace

City State Zip Code  
Gainesville FL 32607

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

Name of Employer Occupation  
Seabulk MERCHANT MARINE OFFICER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.48379

Amount of Each Receipt this Period

250.00

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

1050.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 25
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVEN PANKOW	Date of Receipt MM / DD / YYYY 05 / 05 / 2008
	Mailing Address 521 WHEATLAND AVENUE	<b>Transaction ID:</b> SA11AI.48262
	City State Zip Code LOGANSFORT IN 46947	Amount of Each Receipt this Period -59.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Various Shipping Companies Occupation Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ -59.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) GERARD PANSELL	Date of Receipt MM / DD / YYYY 05 / 16 / 2008
	Mailing Address 1916 NW 80TH AVENUE	<b>Transaction ID:</b> SA11AI.48353
	City State Zip Code MARGATE FL 33063	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer EXECUTIVE & INSTRUCTORS Occupation No rating required Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) JOSEPH PARSONS	Date of Receipt MM / DD / YYYY 05 / 27 / 2008
	Mailing Address P.O. BOX 531	<b>Transaction ID:</b> SA11AI.48418
	City State Zip Code YORK ME 03909	Amount of Each Receipt this Period 293.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer OGLEBAY NORTON COMPANY Occupation 2nd Asst Engineer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 293.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>634.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 25  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16
<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>	17

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

**A.**

Full Name (Last, First, Middle Initial)  
WAYNE PETERS JR.

Mailing Address 4010 BRENTLY CIRCLE

City PANAMA CITY State FL Zip Code 32405

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

Name of Employer OSPREY SHIP MGMT, INC. Occupation 2nd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
-100.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2008

Transaction ID: SA11AI.48260

Amount of Each Receipt this Period  
-100.00

**B.**

Full Name (Last, First, Middle Initial)  
SCOTT PHILLIPS

Mailing Address 6 DAVENPORT CT

City MONROE State NY Zip Code 10950

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

Name of Employer VARIOUS SHIPPING COMPANIES Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
310.00

Date of Receipt  
MM / DD / YYYY  
05 / 27 / 2008

Transaction ID: SA11AI.48419

Amount of Each Receipt this Period  
310.00

**C.**

Full Name (Last, First, Middle Initial)  
TYLER RILEY

Mailing Address 62 S. MONTGOMERY AVENUE

City BAY SHORE State NY Zip Code 11706

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

Name of Employer FORTUNE MARITIME, INC. Occupation 3rd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2008

Transaction ID: SA11AI.48325

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **510.00**

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

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

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

FOR LINE NUMBER: PAGE 14 / 25  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

**A.** Full Name (Last, First, Middle Initial)  
ANTHONY V ROGONE

Mailing Address 59-36 162NE STREET

City FLUSHING State NY Zip Code 11305

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

Name of Employer TRANSOCEANIC CABLE SHIP Occupation 3rd Mate

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 16 / 2008  
**Transaction ID: SA11AI.48358**  
 Amount of Each Receipt this Period: 200.00

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt: 05 / 15 / 2008  
**Transaction ID: SA11AI.48344**  
 Amount of Each Receipt this Period: 50.00

**C.** Full Name (Last, First, Middle Initial)  
DAVID SANCHEZ-NAVARRO

Mailing Address P O BOX 218

City WALPOLE State NH Zip Code 03608

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

Name of Employer VICTORY MARITIME INC. Occupation Master

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 09 / 2008  
**Transaction ID: SA11AI.48315**  
 Amount of Each Receipt this Period: 400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 650.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 25  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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

**A.**

Full Name (Last, First, Middle Initial)  
TIMOTHY SEGUIN

Mailing Address 22033 230TH AVE

City State Zip Code  
TUSTIN MI 49688

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

Name of Employer Occupation  
OGLEBAY NORTON COMPANY 3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
-50.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2008

Transaction ID: SA11AI.48261

Amount of Each Receipt this Period  
-50.00

**B.**

Full Name (Last, First, Middle Initial)  
WOODROW SHELTON, JR.

Mailing Address 1030 GOTT ST.

City State Zip Code  
ANN ARBOR MI 48103

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

Name of Employer Occupation  
MAERSK LINE LTD 3rd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
MM / DD / YYYY  
05 / 08 / 2008

Transaction ID: SA11AI.48305

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
TERENCE SIMMONS

Mailing Address BOX 1855

City State Zip Code  
SARASOTA FL 34230

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2008

Transaction ID: SA11AI.48375

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 25

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)

THOMAS SULLIVAN

Mailing Address 4 SOUTH PINE DRIVE

City State Zip Code  
FRANKLIN MA 02038

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

Name of Employer Occupation  
OCEAN SHIPS INC CHIEF OFFICER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.48395

Amount of Each Receipt this Period  
400.00

**B.**

Full Name (Last, First, Middle Initial)

RICHARD WHITEMORE

Mailing Address 7439 JOSEPH LEWIS RD.

City State Zip Code  
HAYES VA 23072

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

Name of Employer Occupation  
INTEROCEAN UGLAND MGMT. 1st Asst Engineer

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

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 9 / 2 0 0 8

Transaction ID: SA11AI.48453

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN WYSOCKI

Mailing Address 4524 FRENCH RD

City State Zip Code  
ALPENA MI 49707

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

Name of Employer Occupation  
KEY LAKES, INC. Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 362.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.48249

Amount of Each Receipt this Period  
362.00

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

962.00

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

10606.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
**BILL SHUSTER FOR CONGRESS**

Mailing Address PO BOX 1473

City ALTOONA State PA Zip Code 16603

Purpose of Disbursement  
Contribution

Candidate Name  
WILLIAM F SHUSTER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 09

Transaction ID: SB23.48229  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**CITIZENS FOR JOHN OLVER FOR CONGRESS**

Mailing Address PO BOX 819  
PO BOX 819

City AMHERST State MA Zip Code 01004

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN WALTER OLVER

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: MA District: 01

Transaction ID: SB23.48221  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO ELECT MCHUGH**

Mailing Address 228 S. Washington St. Ste. 115  
SUITE 115

City Alexandria State VA Zip Code 22314

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN M MCHUGH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: NY District: 23

Transaction ID: SB23.48213  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

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

Full Name (Last, First, Middle Initial)

Mailing Address 601 S GLENOAKS BLVD., #208

City BURBANK State CA Zip Code 91502

Purpose of Disbursement  
Contribution

Candidate Name  
LORETTA SANCHEZ

Office Sought:  House  
 Senate  
 President

State: CA District: 47

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.48230

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

2000.00

**B. CONYERS FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 1031 N EDGEWOOD STREET

City ARLINGTON State VA Zip Code 22201

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN JR. CONYERS

Office Sought:  House  
 Senate  
 President

State: MI District: 14

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.48222

Date of Disbursement

05 / 16 / 2008

Amount of Each Disbursement this Period

2500.00

**C. DAVE CAMP FOR CONGRESS 2008**

Full Name (Last, First, Middle Initial)

Mailing Address 5915 EASTMAN AVE. SUITE 100  
5915 EASTMAN AVE. SUITE 100

City MIDLAND State MI Zip Code 48640

Purpose of Disbursement  
Contribution

Candidate Name  
DAVID LEE CAMP

Office Sought:  House  
 Senate  
 President

State: MI District: 04

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.48231

Date of Disbursement

05 / 30 / 2008

Amount of Each Disbursement this Period

1000.00

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

5500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DAVID DAVIS VICTORY FUND</b>	<b>Transaction ID:</b> SB23.48215 Date of Disbursement 05 / 09 / 2008	
	Mailing Address PO Box 781		
	City Johnson City	State TN	Zip Code 37605
	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 1000.00	
	Candidate Name DAVID DAVIS	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TN District: 01		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>ENZI FOR US SENATE</b>	<b>Transaction ID:</b> SB23.48232 Date of Disbursement 05 / 30 / 2008	
	Mailing Address PO BOX 2775		
	City CODY	State WY	Zip Code 82414
	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 5000.00	
	Candidate Name MICHAEL B ENZI	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: WY District: 00		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS OF CONGRESSMAN GEORGE MILLER</b>	<b>Transaction ID:</b> SB23.48233 Date of Disbursement 05 / 30 / 2008	
	Mailing Address PO BOX 5864		
	City CONCORD	State CA	Zip Code 94524
	Purpose of Disbursement Contribution	Amount of Each Disbursement this Period 2500.00	
	Candidate Name GEORGE MILLER	Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: CA District: 07		

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

8500.00

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



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) FRIENDS OF JIM CLYBURN	Transaction ID: SB23.48224 Date of Disbursement 05 / 16 / 2008
	Mailing Address PO Box 12567	Amount of Each Disbursement this Period 1500.00
	City Columbia State SC Zip Code 29211	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name JAMES E CLYBURN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 06	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HOUSE BACKPAC	Transaction ID: SB23.48238 Date of Disbursement 05 / 16 / 2008
	Mailing Address PO BOX 30344	Amount of Each Disbursement this Period 1000.00
	City BETHESDA State MD Zip Code 20824	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JERRYS POLITICAL ACTION COMMITTEE (JERRYS PAC)	Transaction ID: SB23.48240 Date of Disbursement 05 / 29 / 2008
	Mailing Address Village Station P.O. Box 19	Amount of Each Disbursement this Period 2500.00
	City New York State NY Zip Code 10014	
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
JIM GERLACH FOR CONGRESS COMMITTEE

Mailing Address PO Box 87

City Uwchland State PA Zip Code 19480

Purpose of Disbursement  
Contribution

Candidate Name  
JIM GERLACH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: PA District: 06

**Transaction ID:** SB23.48225

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
JOHN SPRATT FOR CONGRESS COMMITTEE

Mailing Address POST OFFICE BOX 10986

City ROCK HILL State SC Zip Code 29731

Purpose of Disbursement  
Contribution

Candidate Name  
JOHN MCKEE JR SPRATT

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: SC District: 05

**Transaction ID:** SB23.48226

Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
KEEP NICK RAHALL IN CONGRESS COMMITTEE

Mailing Address P O BOX 64

City BECKLEY, State WV Zip Code 25802

Purpose of Disbursement  
Contribution

Candidate Name  
NICK JOE J II RAHALL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: WV District: 03

**Transaction ID:** SB23.48227

Date of Disbursement

/   /

Amount of Each Disbursement this Period

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

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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

A.	Full Name (Last, First, Middle Initial) <b>MICHAUD FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.48217
	Mailing Address PO Box 1119 11 Bangor Mall Blvd. Suite D	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	City Lewiston	State ME
	Zip Code 04243	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name MICHAEL H MICHAUD	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: ME District: 02	

B.	Full Name (Last, First, Middle Initial) <b>Moving America Forward</b>	<b>Transaction ID:</b> SB23.48234
	Mailing Address 426 C Street, NE	Date of Disbursement MM / DD / YYYY 05 / 30 / 2008
	City Washington	State DC
	Zip Code 20002	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) <b>PAT ROBERTS FOR SENATE</b>	<b>Transaction ID:</b> SB23.48218
	Mailing Address BOX 433	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	City GREAT BEND	State KS
	Zip Code 67530	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name PAT ROBERTS	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: KS District: 00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

A.	Full Name (Last, First, Middle Initial) <b>SEARCHLIGHT LEADERSHIP FUND</b>	<b>Transaction ID:</b> SB23.48219
	Mailing Address 607 14h Street N.W. Suite 800	Date of Disbursement MM / DD / YYYY 05 / 09 / 2008
	City Washington State DC Zip Code 20005	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) <b>SHEILA JACKSON LEE FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.48243
	Mailing Address 3401 LABRANCH	Date of Disbursement MM / DD / YYYY 05 / 16 / 2008
	City HOUSTON State TX Zip Code 77004	Amount of Each Disbursement this Period -1000.00
	Purpose of Disbursement Voided Check	Category/ Type
	Candidate Name SHEILA JACKSON LEE	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) <b>WICKER FOR SENATE</b>	<b>Transaction ID:</b> SB23.48228
	Mailing Address PO BOX 233	Date of Disbursement MM / DD / YYYY 05 / 16 / 2008
	City TUPELO State MS Zip Code 38802	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name ROGER F WICKER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>40500.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

A.

Full Name (Last, First, Middle Initial)

CHARLES CASHMAN

Transaction ID: SB28A.48476

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	0	8

Mailing Address 757 SE 17TH STREET  
# 830

City State Zip Code  
FORT LAUDERDALE FL 33316

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Refund of Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

500.00

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

500.00