

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS POLITICAL ACTION FUND

Report Covering the Period:

From:

0 1 / 0 1 / 2 0 0 7

To:

0 6 / 3 0 / 2 0 0 7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2 0 0 7		16,161.18
(b) Cash on Hand at Beginning of Reporting Period.....	16,161.18	
(c) Total Receipts (from Line 19).....	9,867.35	9,867.35
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26,028.53	26,028.53
7. Total Disbursements (from Line 31).....	8,180.00	8,180.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	17,848.53	17,848.53
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		

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

27059492559

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS POLITICAL ACTION FUND

Report Covering the Period: From:

0 1 / 0 1 / 2 0 0 7

To:

0 6 / 3 0 / 2 0 0 7

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).....
 - (ii) Unitemized.....
 - (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

9	8	6	7	3	5
9	8	6	7	3	5

9	8	6	7	3	5
9	8	6	7	3	5

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

9	8	6	7	3	5
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9	8	6	7	3	5
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12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

9	8	6	7	3	5
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9	8	6	7	3	5
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20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

9	8	6	7	3	5
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9	8	6	7	3	5
---	---	---	---	---	---

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	8,180.00	8,180.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8,180.00	8,180.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

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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)	9 8 6 7 3 5	9 8 6 7 3 5
34. Total Contribution Refunds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9 8 6 7 3 5	9 8 6 7 3 5
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 1 OF 2						
	(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

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)
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)
A. VOLUNTARY CONTRIBUTIONS REC'D VIA
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN
City State Zip Code
\$200.00 PER INDIVL PER CALENDAR YEAR
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
MM/DD/YYYY
01/17/2007
Amount of Each Receipt this Period
1,881.62

Full Name (Last, First, Middle Initial)
B. VOLUNTARY CONTRIBUTIONS REC'D VIA
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN
City State Zip Code
\$200.00 PER INDIVL PER CALENDAR YEAR
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
MM/DD/YYYY
02/16/2007
Amount of Each Receipt this Period
1,555.48

Full Name (Last, First, Middle Initial)
C. VOLUNTARY CONTRIBUTIONS REC'D VIA
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN
City State Zip Code
\$200.00 PER INDIVL PER CALENDAR YEAR
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
MM/DD/YYYY
03/13/2007
Amount of Each Receipt this Period
1,636.47

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

5,073.57

27039492363

**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 2 OF 2	
<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c
	13		14		15
				<input type="checkbox"/>	12
					16
					17

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NAME OF COMMITTEE (In Full)
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

A. VOLUNTARY CONTRIBUTIONS REC'D VIA

Full Name (Last, First, Middle Initial)
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code
\$200.00 PER INDIVI. PER CALENDAR YEAR

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YY
04 / 13 / 2007

Amount of Each Receipt this Period
1 4 3 4 0 3

B. VOLUNTARY CONTRIBUTIONS REC'D VIA

Full Name (Last, First, Middle Initial)
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code
\$200.00 PER INDIVI. PER CALENDAR YEAR

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YY
05 / 15 / 2007

Amount of Each Receipt this Period
1 6 3 9 4 6

C. VOLUNTARY CONTRIBUTIONS REC'D VIA

Full Name (Last, First, Middle Initial)
Mailing Address
P/R DEDUCTIONS AGGREGATING LESS THAN

City State Zip Code
\$200.00 PER INDIVI. PER CALENDAR YEAR

FEC ID number of contributing federal political committee.

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
MM / DD / YY
06 / 19 / 2007

Amount of Each Receipt this Period
1 7 2 0 2 9

SUBTOTAL of Receipts This Page (optional).....▶	4 7 9 3 7 8
TOTAL This Period (last page this line number only).....▶	9 8 6 7 3 5

27039492364

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

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

FOR LINE NUMBER:
(check only one)

PAGE 1 OF 7

<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) **NON-FEDERAL CANDIDATES**

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A.

OREGON DEMOCRATIC CLUB

Date of Disbursement

MM	DD	YY	YY
02	09	20	07

Mailing Address
226 E HAMPTON

City State Zip Code
OREGON OH 43616

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

3	0	0	0	0
---	---	---	---	---

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

Full Name (Last, First, Middle Initial)

B.

STEEL FOR SCHOOL BOARD

Date of Disbursement

MM	DD	YY	YY
02	09	20	07

Mailing Address
2041 PARKWOOD AVE EDWARD WOOTEN, TREASURER

City State Zip Code
TOLEDO OH 43620

Purpose of Disbursement
POLI CONTRI TOLEDO BOARD OF EDUCATION

Candidate Name
STEVEN C. STEEL

Category/
Type

Amount of Each Disbursement this Period

2	0	0	0	0
---	---	---	---	---

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

Full Name (Last, First, Middle Initial)

C.

J. BERNIE QUILTER ELECTION COMMITTEE

Date of Disbursement

MM	DD	YY	YY
02	09	20	07

Mailing Address
3439 FIELDBROOKE LANE CLAUDE MONTGOMERY, TREAS

City State Zip Code
OREGON OH 43616

Purpose of Disbursement
POLI CONTRI LUCAS COUNTY CLERK OF COURTS

Candidate Name
BERNIE QUILTER

Category/
Type

Amount of Each Disbursement this Period

1	0	0	0	0
---	---	---	---	---

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

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

6	0	0	0	0
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TOTAL This Period (last page this line number only).....▶

27039492365

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

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

FOR LINE NUMBER:
(check only one)

PAGE 2 OF 7

<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) **NON-FEDERAL CANDIDATES**
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial) A. SANDUSKY COUNTY DEMOCRATIC PARTY		Date of Disbursement 02 / 09 / 2007
Mailing Address 5 KNOBBY DR		Amount of Each Disbursement this Period 5 0 0 0 0
City FREMONT OH 43420	State Zip Code	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. COMM TO ELECT BOWMAN-ENGLISH		Date of Disbursement 02 / 09 / 2007
Mailing Address 5028 MACKLYN DR JEFFREY D. LINGO, TREASURER		Amount of Each Disbursement this Period 2 0 0 0 0
City TOLEDO OH 43615	State Zip Code	
Purpose of Disbursement POLI CONTRI TOLEDO MUNICIPAL CLERK OF COURT	Category/ Type	
Candidate Name VALLIE BOWMAN-ENGLISH		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. PHIL COPELAND COMMITTEE		Date of Disbursement 02 / 09 / 2007
Mailing Address 4828 MONAC DEBBIE BLAIR, TREASURER		Amount of Each Disbursement this Period 2 5 0 0 0
City TOLEDO OH 43623	State Zip Code	
Purpose of Disbursement POLI CONTRI TOLEDO CITY COUNCIL AT-LARGE	Category/ Type	
Candidate Name PHIL COPELAND		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	9 5 0 0 0
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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) **NON-FEDERAL CANDIDATES**

UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial)

A.

CITIZENS FOR ASHFORD

Date of Disbursement

MM	DD	YYYY
04	04	2007

Mailing Address
2910 COLLINGWOOD

City State Zip Code
TOLEDO OH 43610

Purpose of Disbursement
POLI CONTRI TOLEDO CITY COUNCIL DISTRICT #4

Candidate Name
MICHAEL D. ASHFORD

Category/
Type

Amount of Each Disbursement this Period

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

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

B.

STONER FOR MAYOR

Date of Disbursement

MM	DD	YYYY
04	09	2007

Mailing Address
2415 ROSS ST E.J. HUGHES, JR., TREASURER

City State Zip Code
NORTHWOOD OH 43619

Purpose of Disbursement
POLI CONTRI NORTHWOOD MAYOR

Candidate Name
MARK A. STONER

Category/
Type

Amount of Each Disbursement this Period

2	0	0	0	0
---	---	---	---	---

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

C.

ELECT PETE GERKEN COMMITTEE

Date of Disbursement

MM	DD	YYYY
04	09	2007

Mailing Address
412 14TH ST GEORGE GERKEN, TREASURER

City State Zip Code
TOLEDO OH 43604

Purpose of Disbursement
POLI CONTRI LUCAS COUNTY COMMISSIONER

Candidate Name
PETE GERKEN

Category/
Type

Amount of Each Disbursement this Period

2	0	0	0	0
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Office Sought: House Senate President
Disbursement For: Primary General Other (specify) ▼
State: District:

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

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

6	5	0	0	0
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27039492368

**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) **NON-FEDERAL CANDIDATES**
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial) A. FRIENDS OF JOE MCNAMARA		Date of Disbursement 04 / 09 / 2007
Mailing Address 4619 CRANBROOK DR KEVIN PIROZEK, TREASURER		Amount of Each Disbursement this Period 1 0 0 0 0 0
City TOLEDO OH 43615	State Zip Code	
Purpose of Disbursement POLI CONTRI TOLEDO CITY COUNCIL AT-LARGE		Category/ Type
Candidate Name JOE MCNAMARA		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. FRIENDS OF SKELDON WOZNAK		Date of Disbursement 04 / 09 / 2007
Mailing Address 2823 PEMBERTON JENNIFER SORGENFREI, TREASURER		Amount of Each Disbursement this Period 2 0 0 0 0 0
City TOLEDO OH 43606	State Zip Code	
Purpose of Disbursement POLI CONTRI LUCAS COUNTY BOARD OF COMMISSIONERS		Category/ Type
Candidate Name TINA SKELDON-WOZNAK		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. TERESA FEDOR FOR SENATE COMMITTEE		Date of Disbursement 04 / 13 / 2007
Mailing Address 2054 BELVEDERE DR CLIFF MALLETT, TREASURER		Amount of Each Disbursement this Period 1 0 0 0 0 0
City TOLEDO OH 43614	State Zip Code	
Purpose of Disbursement POLI CONTRI OHIO SENATE DISTRICT #11		Category/ Type
Candidate Name TERESA FEDOR		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	2 2 0 0 0 0
TOTAL This Period (last page this line number only).....▶	

27039492369

**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) **NON-FEDERAL CANDIDATES**
UNITED ASSOC., LOCAL 50 PLBRS & STMFRS, POLITICAL ACTION FUND

Full Name (Last, First, Middle Initial) A. LUCAS COUNTY YOUNG DEMOCRATS		Date of Disbursement MM / DD / YYYY 04 / 24 / 2007
Mailing Address 425 JEFFERSON AVE #615 KEVIN PIROZEK, TREASURER		Amount of Each Disbursement this Period 5 0 0 0 0
City TOLEDO OH 43604	State Zip Code	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. SANDUSKY COUNTY DEMOCRATIC PARTY		Date of Disbursement MM / DD / YYYY 04 / 24 / 2007
Mailing Address 5 KNOBBY DR		Amount of Each Disbursement this Period 2 0 0 0 0
City FREMONT OH 43420	State Zip Code	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS & NEIGHBORS OF LINDSAY WEBB		Date of Disbursement MM / DD / YYYY 05 / 18 / 2007
Mailing Address 2828 128TH ST KATIE CLARK, TREASURER		Amount of Each Disbursement this Period 1 0 0 0 0
City TOLEDO OH 43611	State Zip Code	
Purpose of Disbursement POLITICAL CONTRIBUTION	Category/Type	
Candidate Name LINDSAY WEBB		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional).....▶	1 7 0 0 0 0
TOTAL This Period (last page this line number only).....▶	

27039492370

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 7 OF 7
	<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)	NON-FEDERAL CANDIDATES
UNITED ASSOC., LOCAL 50 PLBRS & STMFTRS, POLITICAL ACTION FUND	

Full Name (Last, First, Middle Initial)		Date of Disbursement	
A. LEAGUE OF WOMEN VOTERS TOLEDO-LUCAS COUNTY		MM/DD/YYYY	
Mailing Address PO BOX 2506		05 18 2007	
City State Zip Code TOLEDO OH 43606-2506			
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period	
Candidate Name		8 0 0 0	
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
B. COMMITTEE TO ELECT MARTY SKELDON		MM/DD/YYYY	
Mailing Address 2921 BARRINGTON DR ANITA TALLENT, TREASURER		05 18 2007	
City State Zip Code TOLEDO OH 43606			
Purpose of Disbursement POLI CONTRI TOLEDO CITY COUNCIL, DISTRICT #5		Amount of Each Disbursement this Period	
Candidate Name MARTY SKELDON		5 0 0 0 0	
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial)		Date of Disbursement	
C. FULTON COUNTY DEMOCRATIC WOMEN'S CLUB		MM/DD/YYYY	
Mailing Address 912 FERNWOOD		05 18 2007	
City State Zip Code DELTA OH 43515			
Purpose of Disbursement POLITICAL CONTRIBUTION		Amount of Each Disbursement this Period	
Candidate Name		2 5 0 0 0	
Office Sought:	Disbursement For:		
<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional).....▶	8 3 0 0 0
TOTAL This Period (last page this line number only).....▶	8 1 8 0 0 0

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Federal Election Commission
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Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
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<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
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<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jna
 PREPARER

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