

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
MARINETTE MARINE CORPORATION PAC MMCPAC

ADDRESS (number and street) 1600 ELY ST
 Check if different than previously reported. (ACC)
MARINETTE WI 54143

2. **FEC IDENTIFICATION NUMBER** C00459453
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 (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of _____

5. Covering Period 10 14 2010 through 11 22 2010

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 Ms Shanna Lee Zahn
Signature of Treasurer Electronically Filed by Ms Shanna Lee Zahn Date 12 13 2010

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

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

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
MARINETTE MARINE CORPORATION PAC MMCPAC

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		5609.97
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	6727.13									
(c) Total Receipts (from Line 19)	3249.49	18566.65								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	9976.62	24176.62								
7. Total Disbursements (from Line 31)	6000.00	20200.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3976.62	3976.62								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

MARINETTE MARINE CORPORATION PAC MMCPAC

Report Covering the Period: From:

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

Y	Y	Y	Y
2	0	1	0

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)	2729.72	10357.79
(ii) Unitemized	519.77	8208.86
(iii) TOTAL (add Lines 11(a)(i) and (ii)	3249.49	18566.65
(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)	3249.49	18566.65
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	3249.49	18566.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	3249.49	18566.65

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4500.00	18700.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	1500.00	1500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	6000.00	20200.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6000.00	20200.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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)	3249.49	18566.65
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	3249.49	18566.65
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 / 19
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Mr. TODD S. ANDERSON	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 1188 SWAN ROAD	Transaction ID: SA11AI.4626
	City State Zip Code DEPERE WI 54115	Amount of Each Receipt this Period 80.00
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) JAMES BRISKEY	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address N3724 CLEVELAND AVENUE	Transaction ID: SA11AI.4631
	City State Zip Code MARINETTE WI 54143	Amount of Each Receipt this Period 128.12
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation PROGRAM MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 736.69	

C.	Full Name (Last, First, Middle Initial) WAYNE CONNER	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 3400 Pierce Ave Lot 101	Transaction ID: SA11AI.4634
	City State Zip Code Marinette WI 54143	Amount of Each Receipt this Period 89.16
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation ILS MANAGER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 512.67	

SUBTOTAL of Receipts This Page (optional)	297.28
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MARINETTE MARINE CORPORATION PAC MMCPAC

<p>A. Full Name (Last, First, Middle Initial) TRACY T GOVEYOU</p> <p>Mailing Address N7805 CEDAR LANE</p> <p>City State Zip Code PORTERFIELD WI 54149</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MARINETTE MARINE CORPORAT- PRODUCTION MANAGER ION</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 345.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4635</p> <p>Amount of Each Receipt this Period 60.00</p> <p>Bi-weekly Payroll Deducti- on PAC Contribution</p>
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<p>B. Full Name (Last, First, Middle Initial) Mr. TIMOTHY J. DANHIEUX</p> <p>Mailing Address 2417 21ST STREET</p> <p>City State Zip Code MENOMINEE MI 49858</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MARINETTE MARINE CORPORAT- ION</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 425.96</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4636</p> <p>Amount of Each Receipt this Period 74.08</p> <p>Bi-weekly Payroll Deducti- on PAC Contribution</p>
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<p>C. Full Name (Last, First, Middle Initial) Ms DEBRA L. DEACON</p> <p>Mailing Address N6125 CHARLEBOIS ROAD</p> <p>City State Zip Code HARDWOOD MI 49807</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MARINETTE MARINE CORPORAT- ION</p> <p>Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 599.84</p>	<p>Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 2 / 2 0 1 0</p> <p>Transaction ID: SA11AI.4637</p> <p>Amount of Each Receipt this Period 104.32</p> <p>Bi-weekly Payroll Deducti- on PAC Contribution</p>
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SUBTOTAL of Receipts This Page (optional)	238.40
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 19
	<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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Mr. CARLOS E. DELREAL	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 213 WATER STREET	Transaction ID: SA11AI.4638
	City State Zip Code MARINETTE WI 54143	Amount of Each Receipt this Period 70.96
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 408.02	

B.	Full Name (Last, First, Middle Initial) Mr. TERANCE THOMAS ETNYRE	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 19480 WING TIP ROAD	Transaction ID: SA11AI.4640
	City State Zip Code COLORADO SPRINGS CO 80908	Amount of Each Receipt this Period 259.60
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation VICE PRESIDENT GOVERNMENT PROGRAMS	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1038.40	

C.	Full Name (Last, First, Middle Initial) Mr. DALE r. HANSON	Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 7472 COUNTY ROAD Y	Transaction ID: SA11AI.4649
	City State Zip Code OCOONTO WI 54143	Amount of Each Receipt this Period 36.00
	FEC ID number of contributing federal political committee. C	Bi-weekly Payroll Deduction on PAC Contribution
Name of Employer MARINETTE MARINE CORPORATION	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.00	

SUBTOTAL of Receipts This Page (optional)	366.56
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MARINETTE MARINE CORPORATION PAC MMCPAC

A. Full Name (Last, First, Middle Initial)
Mr. JEFFREY H. HOFFMAN

Mailing Address **2981 CINNAMON RIDGE TRAIL**

City **GREEN BAY** State **WI** Zip Code **54313**

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

Name of Employer **MARINETTE MARINE CORPORAT-ION** Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11AI.4654

Amount of Each Receipt this Period 40.00

Bi-weekly Payroll Deducti-on PAC Contribution

B. Full Name (Last, First, Middle Initial)
Mrs. MARC E. JAMO

Mailing Address **1701 FIRST STREET**

City **MENOMINEE** State **MI** Zip Code **49858**

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

Name of Employer **MARINETTE MARINE CORPORAT-ION** Occupation **CONTRACTS MANAGER**

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11AI.4657

Amount of Each Receipt this Period 60.00

Bi-weekly Payroll Deducti-on PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. JOHN E. KRUEGER

Mailing Address **1041 MARINETTE AVENUE**

City **MARINETTE** State **WI** Zip Code **54143**

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

Name of Employer **MARINETTE MARINE CORPORAT-ION** Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **340.34**

Date of Receipt MM / DD / YYYY
11 / 22 / 2010

Transaction ID: SA11AI.4659

Amount of Each Receipt this Period 59.12

Bi-weekly Payroll Deducti-on PAC Contribution

SUBTOTAL of Receipts This Page (optional) 159.12

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 / 19
	<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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Mr. BRUCE KUKICH		Date of Receipt
	Mailing Address N1734 STQTE HWY M-35		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	MENOMINEE	MI	49858
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation DEPUTY PROGRAM MANAGER	Transaction ID: SA11AI.4660
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 690.00	<input type="text"/> 120.00
			Bi-weekly Payroll Deducti- on PAC Contribution

B.	Full Name (Last, First, Middle Initial) JAMES T LACOSSE		Date of Receipt
	Mailing Address 7 ASPEN LANE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	GLADSTONE	MI	49837
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation PROGRAM MANAGER	Transaction ID: SA11AI.4661
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 543.26	<input type="text"/> 94.48
			Bi-weekly Payroll Deducti- on PAC Contribution

C.	Full Name (Last, First, Middle Initial) Mr. STANELY G. LAIRD		Date of Receipt
	Mailing Address 2910 14TH AVENUE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	MENOMINEE	MI	49858
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation	Transaction ID: SA11AI.4662
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 398.13	<input type="text"/> 69.24
			Bi-weekly Payroll Deducti- on PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 283.72
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 19
(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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A. Full Name (Last, First, Middle Initial)
Mr. DARYL L. LANAVILLE

Mailing Address N13566 CNTY RD 551

City State Zip Code
WILSON MI 49896

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-ION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 22 / 2010**

Transaction ID: SA11AI.4663

Amount of Each Receipt this Period **40.00**

Bi-weekly Payroll Deducti- on PAC Contribution

B. Full Name (Last, First, Middle Initial)
GORDON J LEPISTO

Mailing Address 4109 13TH STREET

City State Zip Code
MENOMINEE MI 49858

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-ION DEPUTY PROGRAM MANAGER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **519.11**

Date of Receipt **11 / 22 / 2010**

Transaction ID: SA11AI.4664

Amount of Each Receipt this Period **90.28**

Bi-weekly Payroll Deducti- on PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. RALPH H. MATTHEWS

Mailing Address 626 ELIZABETH AVENUE

City State Zip Code
MARINETTE WI 54143

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-ION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **269.60**

Date of Receipt **11 / 22 / 2010**

Transaction ID: SA11AI.4666

Amount of Each Receipt this Period **47.68**

Bi-weekly Payroll Deducti- on PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **177.96**

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 12 / 19
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
MARINETTE MARINE CORPORATION PAC MMCPAC

A. Full Name (Last, First, Middle Initial)
RICHARD MCCREARY

Mailing Address 320 IROQUOIS AVE

City State Zip Code
GREEN BAY WI 54301

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT- PRESIDENT
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 1472.00

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

Transaction ID: SA11AI.4667

Amount of Each Receipt this Period
256.00

Bi-weekly Payroll Deducti-
on PAC Contribution

B. Full Name (Last, First, Middle Initial)
ROBERT M METZGER

Mailing Address N2948 RIGHT OF WAY ROAD

City State Zip Code
PESHTIGO WI 54157

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT- DIRECTOR OF PRODUCTION
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: SA11AI.4669

Amount of Each Receipt this Period
80.00

Bi-weekly Payroll Deducti-
on PAC Contribution

C. Full Name (Last, First, Middle Initial)
LORI OKRASINSKI

Mailing Address N6298 BRAMBLE LANE

City State Zip Code
PORTERFIELD WI 54159

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT- PURCHASING MANAGER
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 460.00

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

Transaction ID: SA11AI.4673

Amount of Each Receipt this Period
80.00

Bi-weekly Payroll Deducti-
on PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► 416.00

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 13 / 19

(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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.

Full Name (Last, First, Middle Initial)
Mr. ALLAN POMEROY

Mailing Address N4631 PINWOODS LOOP ROAD 11

City State Zip Code
WALLACE MI 49893

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

Name of Employer
MARINETTE MARINE CORPORAT-
ION

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

273.47

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4676

Amount of Each Receipt this Period

47.56

Bi-weekly Payroll Deducti-
on PAC Contribution

B.

Full Name (Last, First, Middle Initial)
DUANE R ROEHM

Mailing Address 4115 15TH STREET

City State Zip Code
MENOMINEE MI 49858

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

Name of Employer
MARINETTE MARINE CORPORAT-
ION

Occupation

VICE PRESIDENT PROGRAMS

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4679

Amount of Each Receipt this Period

80.00

Bi-weekly Payroll Deducti-
on PAC Contribution

C.

Full Name (Last, First, Middle Initial)
Mr. DANIEL J ROLAND

Mailing Address N5649 HWY 180

City State Zip Code
MARINETTE WI 54143

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

Name of Employer
MARINETTE MARINE CORPORAT-
ION

Occupation

Receipt For:

Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

425.04

Date of Receipt

M M / D D / Y Y Y Y
1 1 / 2 2 / 2 0 1 0

Transaction ID: SA11AI.4680

Amount of Each Receipt this Period

73.92

Bi-weekly Payroll Deducti-
on PAC Contribution

SUBTOTAL of Receipts This Page (optional) ▶

201.48

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 19
	<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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Mr. RONALD SENDZIK		Date of Receipt
	Mailing Address P.O. BOX 66		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	IRON MOUNTAIN	MI	49801
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4684
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 46.56
		<input type="text"/> 267.72	Bi-weekly Payroll Deducti- on PAC Contribution

B.	Full Name (Last, First, Middle Initial) JUSTIN W SLATER		Date of Receipt
	Mailing Address W2520 PETERSON ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	MARINETTE	WI	54143
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4685
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation PROJECT ENGINEER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 96.48
		<input type="text"/> 554.76	Bi-weekly Payroll Deducti- on PAC Contribution

C.	Full Name (Last, First, Middle Initial) Mr. CLEMENT I. SMALLS		Date of Receipt
	Mailing Address 1521 CARNEY BLVD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 2 2 / 2 0 1 0
	City	State	Zip Code
	MARINETTE	WV	54143
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.4686
Name of Employer MARINETTE MARINE CORPORAT-ION		Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 460.00	Weekly Payroll Deduction PAC Contribution

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 223.04
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 19
	<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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Mr. MARK H. SPICKNALL		Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 2117 KINGFISHER LN		Transaction ID: SA11AI.4688
	City GREEN BAY	State WI	Zip Code 54313
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 80.00
	Name of Employer MARINETTE MARINE CORPORAT-ION	Occupation	Bi-weekly Payroll Deducti-on PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00	

B.	Full Name (Last, First, Middle Initial) Mr. ROBERT STEVENS		Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 535 MAIN STREET		Transaction ID: SA11AI.4689
	City MARINETTE	State WI	Zip Code 54143
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer MARINETTE MARINE CORPORAT-ION	Occupation	Bi-weekly Payroll Deducti-on PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

C.	Full Name (Last, First, Middle Initial) Mr. ROBERT A. SUNDERLAGE		Date of Receipt MM / DD / YYYY 11 / 22 / 2010
	Mailing Address 2893 HARBOR WINDS DRIVE		Transaction ID: SA11AI.4691
	City SUAMICO	State WI	Zip Code 54173
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer MARINETTE MARINE CORPORAT-ION	Occupation	Bi-weekly Payroll Deducti-on PAC Contribution
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 230.00	

SUBTOTAL of Receipts This Page (optional)	▶	160.00
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 / 19
(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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A. Full Name (Last, First, Middle Initial)
ROBERT VLIES

Mailing Address 515 FLORA AVENUE

City State Zip Code
ALGOMA WI 54201

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT- STRUCTURAL ENGINEER
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 265.42

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

Transaction ID: SA11AI.4692

Amount of Each Receipt this Period
46.16

Bi-weekly Payroll Deducti-
on PAC Contribution

B. Full Name (Last, First, Middle Initial)
Mr. MICHAEL WALTZ

Mailing Address 2340 SHORE DRIVE

City State Zip Code
MARINETTE WI 54143

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

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

Transaction ID: SA11AI.4693

Amount of Each Receipt this Period
40.00

Bi-weekly Payroll Deducti-
on PAC Contribution

C. Full Name (Last, First, Middle Initial)
Mr. SCOTT A. WELLENS

Mailing Address N916 HWY M35

City State Zip Code
MENOMINEE MI 49858

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-
ION

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 230.00

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

Transaction ID: SA11AI.4695

Amount of Each Receipt this Period
40.00

Bi-weekly Payroll Deducti-
on PAC Contribution

SUBTOTAL of Receipts This Page (optional) ► **126.16**

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 17 / 19
(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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.

Full Name (Last, First, Middle Initial)
Mr. PETER W. WERGEDAL

Mailing Address N3081 SEWARD HEIGHTS ROAD

City State Zip Code
PESHTIGO WI 54147

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-ION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: SA11AI.4696

Amount of Each Receipt this Period
40.00

Bi-weekly Payroll Deducti-
on PAC Contribution

B.

Full Name (Last, First, Middle Initial)
Mr. JAMES G. WILSON

Mailing Address W6345 CTY HWY G

City State Zip Code
CRIVITZ WI 54114

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

Name of Employer Occupation
MARINETTE MARINE CORPORAT-ION

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

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

Transaction ID: SA11AI.4698

Amount of Each Receipt this Period
40.00

Bi-weekly Payroll Deducti-
on PAC Contribution

SUBTOTAL of Receipts This Page (optional)	▶	80.00
TOTAL This Period (last page this line number only)	▶	2729.72

**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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) BENISHEK FOR CONGRESS	Transaction ID: SB23.4708 Date of Disbursement
	Mailing Address 802 Pentoga Trail	<input type="text" value="11"/> <input type="text" value="11"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Crystal Falls State MI Zip Code 49920	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for Dan Benishek for Congress fund	<input type="text" value="1500.00"/>
	Candidate Name DANIEL J BENISHER	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 01	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) RIBBLE FOR CONGRESS	Transaction ID: SB23.4706 Date of Disbursement
	Mailing Address PO BOX 7200	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City APPLETON State WI Zip Code 54912	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for ReidRibble's campaign fund for election	<input type="text" value="1500.00"/>
	Candidate Name REID RIBBLE	<input type="text" value=""/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) RON JOHNSON FOR SENATE INC	Transaction ID: SB23.4704 Date of Disbursement
	Mailing Address 601 OREGON STREET SUITE A	<input type="text" value="10"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City OSHKOSH State WI Zip Code 54902	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution for Ron Johnson campaign fund for election	<input type="text" value="1500.00"/>
	Candidate Name RONALD HAROLD JOHNSON	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4500.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="4500.00"/>

**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)

PAGE 19 / 19

<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)
MARINETTE MARINE CORPORATION PAC MMCPAC

A.	Full Name (Last, First, Middle Initial) Friends of Scott Walker		Transaction ID: SB29.4710	
	Mailing Address PO Box 100828		Date of Disbursement 10 / 25 / 2010	
City Wauwataosa		State WI	Zip Code 53210	
Purpose of Disbursement Contribution for Scott Walker's campaign fund for election.			Amount of Each Disbursement this Period 1500.00	
Candidate Name Friends of Scott Walker			Category/ Type	
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) ▶

1500.00

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

1500.00