

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) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20 (M2), May 20 (M5), Aug 20 (M8), Nov 20 (M11), Mar 20 (M3), Jun 20 (M6), Sep 20 (M9), Dec 20 (M12), 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) (d) 30-Day Post -Election Report for the: General (30G), Runoff (30R), Special (30S)

5. Covering Period 04 01 2008 through 04 30 2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Type or Print Name of Treasurer Jose Leonard Signature of Treasurer Electronically Filed by Jose Leonard Date 06 17 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		5867.27
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	85820.52									
(c) Total Receipts (from Line 19)	37347.03	204231.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	123167.55	210098.85								
7. Total Disbursements (from Line 31)	76300.00	163231.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	46867.55	46867.55								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

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

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	4

D	D
3	0

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	15920.00	74416.00
(i) Itemized (use Schedule A)	19377.00	127543.00
(ii) Unitemized	35297.00	201959.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	35297.00	201959.00
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	2000.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	50.03	50.03
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))	37347.03	204231.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37347.03	204231.58

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) 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.....	75800.00	162300.00
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	500.00	600.00
(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))	500.00	600.00
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))..	76300.00	163231.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	76300.00	163231.30

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	35297.00	201959.00
34. Total Contribution Refunds (from Line 28(d))	500.00	600.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	34797.00	201359.00
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: PAGE 6 / 46
(check only one)
 11a 11b 11c 12
 13 14 15 16 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

A. Full Name (Last, First, Middle Initial)
RICARDO ARAIZA
Mailing Address 406 E MONROE AVE
City ORANGE State CA Zip Code 92667
FEC ID number of contributing federal political committee. **C**
Name of Employer DYN MARINE SERVICES Occupation SECOND MATE
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 04 / 17 / 2008
Transaction ID: SA11AI.48053
Amount of Each Receipt this Period 400.00

B. Full Name (Last, First, Middle Initial)
BROR AXELSSON
Mailing Address 611 SHUN PIKE RD
City CAPE MAY State NJ Zip Code 08204
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 04 / 14 / 2008
Transaction ID: SA11AI.47996
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
OLIVER J BABAJKO
Mailing Address 20 Cross Rdge
City GREENVILLE State SC Zip Code 29607
FEC ID number of contributing federal political committee. **C**
Name of Employer OSPREY SHIP MGMT, INC. Occupation 3rd Mate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 220.00
Date of Receipt 04 / 04 / 2008
Transaction ID: SA11AI.47835
Amount of Each Receipt this Period 220.00

SUBTOTAL of Receipts This Page (optional) ► 1020.00
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 7 / 46
(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)
WILLIAM C BARRERE

Mailing Address 93 DELANNOY AVE, #1105

City COCOA State FL Zip Code 32922

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

Name of Employer MAERSK LINE LTD Occupation Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 04 / 10 / 2008
Transaction ID: SA11AI.47925
Amount of Each Receipt this Period: 200.00

B. Full Name (Last, First, Middle Initial)
MICHAEL W BARRY

Mailing Address 123 SHADOWLAWN AVE

City PASS CHRISTIAN State MS Zip Code 39571

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

Name of Employer SEABULK TANKERS, INC. Occupation Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 04 / 16 / 2008
Transaction ID: SA11AI.48031
Amount of Each Receipt this Period: 250.00

C. Full Name (Last, First, Middle Initial)
JONATHAN E BARTHOLOMEW

Mailing Address 729 NORMANDY BLVD

City PT. ORANGE State FL Zip Code 32127

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

Name of Employer SEALIFT, INC. Occupation 2nd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 04 / 03 / 2008
Transaction ID: SA11AI.47812
Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) ▶ 750.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s)
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FOR LINE NUMBER: PAGE 8 / 46
(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)
JONATHAN E BARTHOLOMEW

Mailing Address 729 NORMANDY BLVD

City State Zip Code
PT. ORANGE FL 32127

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SEALIFT, INC. 2nd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt MM / DD / YYYY
04 / 04 / 2008

Transaction ID: SA11AI.47843

Amount of Each Receipt this Period 300.00

B. Full Name (Last, First, Middle Initial)
JONATHAN E BARTHOLOMEW

Mailing Address 729 NORMANDY BLVD

City State Zip Code
PT. ORANGE FL 32127

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
SEALIFT, INC. 2nd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt MM / DD / YYYY
04 / 04 / 2008

Transaction ID: SA11AI.47848

Amount of Each Receipt this Period -300.00

C. Full Name (Last, First, Middle Initial)
THOMAS J CABAN

Mailing Address 13435 SOUTH MCALL RD, SUITE 117

City State Zip Code
PORT CHARLOTTE FL 33981

FEC ID number of contributing federal political committee. C

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP 2nd Mate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt MM / DD / YYYY
04 / 02 / 2008

Transaction ID: SA11AI.47784

Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) 400.00

TOTAL This Period (last page this line number only)

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

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FOR LINE NUMBER: PAGE 9 / 46
(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)
BART A CLENDENIN

Mailing Address 15 BERNARD STREET

City State Zip Code
ST AUGUSTINE FL 32084

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 3rd Mate

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.47850

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
GREGORY J CORNA

Mailing Address 757 SE 17TH STREET, APT 124

City State Zip Code
FORT LAUDERDALE FL 33316

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

Name of Employer SEALIFT CHEMICALS, INC. Occupation Chief Engineer

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11AI.47823

Amount of Each Receipt this Period
200.00

C. Full Name (Last, First, Middle Initial)
KEVIN M COX

Mailing Address 3201 Douglasdale Rd

City State Zip Code
Richmond VA 23221

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 ▼ 500.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.47818

Amount of Each Receipt this Period
500.00

SUBTOTAL of Receipts This Page (optional) ► 900.00

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

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

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FOR LINE NUMBER: PAGE 10 / 46
(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)
KEVIN M COX

Mailing Address 3201 Douglasdale Rd

City Richmond State VA Zip Code 23221

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 ▼ 500.00

Date of Receipt 04 / 04 / 2008
Transaction ID: SA11AI.47846
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
MARK G DE PALMA

Mailing Address 300 NORTH ST

City NEPTUNE BEACH State FL Zip Code 32266

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 3rd Mate

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 29 / 2008
Transaction ID: SA11AI.48164
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
TODD A DESROSIERS

Mailing Address 1400 COLORADO ST APT C

City BOULDER CITY State NV Zip Code 89005

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

Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 3rd Asst Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 04 / 11 / 2008
Transaction ID: SA11AI.47975
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00

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 11 / 46

(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)
RANDY DIAZ

Mailing Address 7317 KADEL WAY

City State Zip Code
ORLANDO FL 32822

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

Name of Employer Occupation
USS TRANSPORT, LLC 3rd Mate

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 262.00

Date of Receipt

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

Transaction ID: SA11AI.48160

Amount of Each Receipt this Period
150.00

B.

Full Name (Last, First, Middle Initial)
TIMOTHY P DOHERTY

Mailing Address 7 HILLTOP LANE

City State Zip Code
DUXBURY MA 02332

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

Name of Employer Occupation
AMERICAN OVERSEAS MARINE Chief Engineer

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.48021

Amount of Each Receipt this Period
400.00

C.

Full Name (Last, First, Middle Initial)
JOHN T DOLAN

Mailing Address 8 FULLER DRIVE

City State Zip Code
NORTON MA 02766

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

Name of Employer Occupation
INTEROCEAN AMERICAN SHIPPING CORP 1st Asst Engineer

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

Date of Receipt

M M / D D / Y Y Y Y
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.48079

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ▶

950.00

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 12 / 46

(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)
ERICH W DOLL

Mailing Address 11800 HERRICK LANE

City State Zip Code
LOUISVILLE KY 40243

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

Name of Employer Occupation
OSPREY SHIP MGMT, INC. 3rd Mate

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.47954

Amount of Each Receipt this Period

-400.00

B.

Full Name (Last, First, Middle Initial)
CHRISTO S FENNELL

Mailing Address P.O. BOX 100

City State Zip Code
PILOT VA 24138

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

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP Chief Mate

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

Date of Receipt

M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.47816

Amount of Each Receipt this Period

400.00

C.

Full Name (Last, First, Middle Initial)
CHRISTO S FENNELL

Mailing Address P.O. BOX 100

City State Zip Code
PILOT VA 24138

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

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP Chief Mate

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

Date of Receipt

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

Transaction ID: SA11AI.47845

Amount of Each Receipt this Period

400.00

SUBTOTAL of Receipts This Page (optional) ▶

400.00

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 13 / 46
(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)
JOHN P FERET
Mailing Address 2178 GRAND BLVD
City NISKAYUNA State NY Zip Code 12309
FEC ID number of contributing federal political committee. **C**
Name of Employer TRANSOCEANIC CABLE SHIP Occupation 2nd Asst Engineer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00
Date of Receipt 04 / 02 / 2008
Transaction ID: SA11AI.47790
Amount of Each Receipt this Period 500.00

B. Full Name (Last, First, Middle Initial)
ROBERT F FINKELDIE
Mailing Address 145 PROVINCE ST
City LACONIA State NH Zip Code 03246
FEC ID number of contributing federal political committee. **C**
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 2nd Mate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 04 / 03 / 2008
Transaction ID: SA11AI.47810
Amount of Each Receipt this Period 400.00

C. Full Name (Last, First, Middle Initial)
ROBERT F FINKELDIE
Mailing Address 145 PROVINCE ST
City LACONIA State NH Zip Code 03246
FEC ID number of contributing federal political committee. **C**
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP Occupation 2nd Mate
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00
Date of Receipt 04 / 04 / 2008
Transaction ID: SA11AI.47842
Amount of Each Receipt this Period 400.00

SUBTOTAL of Receipts This Page (optional) ► 1300.00
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 14 / 46
	<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

A.	Full Name (Last, First, Middle Initial) PAUL S FORAN	Date of Receipt MM / DD / YYYY 04 / 14 / 2008
	Mailing Address 36 CENTER STREET, SUITE 171	Transaction ID: SA11AI.47995
	City State Zip Code WOLFEBORO NH 03894	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CROWLEY LINER SERVICES Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) WILLIAM J GAMAGE	Date of Receipt MM / DD / YYYY 04 / 10 / 2008
	Mailing Address 220 CUMBERLAND ROAD	Transaction ID: SA11AI.47929
	City State Zip Code NORTH YARMOUTH ME 04097	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INTEROCEAN AMERICAN SHIPPING CORP Chief Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) RICCARDO G GIANNONE	Date of Receipt MM / DD / YYYY 04 / 23 / 2008
	Mailing Address 3 WEST THRUSH DR	Transaction ID: SA11AI.48113
	City State Zip Code MILFORD DE 19963	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INTEROCEAN AMERICAN SHIPPING CORP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional)	▶	1100.00
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 15 / 46
	<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

A.	Full Name (Last, First, Middle Initial) GEORGE A GILLESPIE	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 2 / 2 0 0 8
	Mailing Address 1326 SE 17TH STREET, #318	Transaction ID: SA11AI.47781
	City State Zip Code FORT LAUDERDALE FL 33316	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation WILSON SHIPPING CO. INC. 2nd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) GARY W HANSON II	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 8
	Mailing Address P.O. BOX 84	Transaction ID: SA11AI.47822
	City State Zip Code PITTSFIELD ME 04967	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INTEROCEAN AMERICAN SHIPP- ING CORP 2nd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C.	Full Name (Last, First, Middle Initial) EVERETT M HATTON	Date of Receipt M M / D D / Y Y Y Y Y 0 4 / 0 4 / 2 0 0 8
	Mailing Address 3830 HWY A1A, #4-134	Transaction ID: SA11AI.47819
	City State Zip Code MELBOURNE BEACH FL 32951	Amount of Each Receipt this Period 150.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SEABULK TANKERS, INC. Chief Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	950.00
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 16 / 46
	<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) KYLE D HICKEY		Date of Receipt
	Mailing Address 5561 E 4TH ST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 09 / 2008
	City	State	Zip Code
	LONG BEACH	CA	90814
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.47919
Name of Employer USS TRANSPORT, LLC		Occupation 3rd Mate	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"/> 250.00
		<input type="text"/> 250.00	

B.	Full Name (Last, First, Middle Initial) JAMES M HOOK		Date of Receipt
	Mailing Address 252 HONEYMAN AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 15 / 2008
	City	State	Zip Code
	MIDDLETOWN	RI	02842
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.48008
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP		Occupation Chief Mate	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"/> 200.00
		<input type="text"/> 400.00	

C.	Full Name (Last, First, Middle Initial) GEORGE S HUTCHINS		Date of Receipt
	Mailing Address 29 LEAVITT FARM LANE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 04 / 22 / 2008
	City	State	Zip Code
	YORK	ME	03909
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.48093
Name of Employer SEABULK TANKERS, INC.		Occupation Chief 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"/> 200.00
		<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 650.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 46
	<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

A.	Full Name (Last, First, Middle Initial) FRANK J JOPE	Date of Receipt MM / DD / YYYY 04 / 14 / 2008
	Mailing Address 5921 N. CARNATION DRIVE	Transaction ID: SA11AI.47993
	City State Zip Code BEVERLY HILLS FL 34465	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation INTEROCEAN AMERICAN SHIPPING CORP Chief Mate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

B.	Full Name (Last, First, Middle Initial) TONY V KAPLAN	Date of Receipt MM / DD / YYYY 04 / 09 / 2008
	Mailing Address P.O. BOX 861	Transaction ID: SA11AI.47911
	City State Zip Code VOLCANO HI 96785	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MAERSK LINE LTD 3rd Mate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

C.	Full Name (Last, First, Middle Initial) ROBERT F KELLY	Date of Receipt MM / DD / YYYY 04 / 17 / 2008
	Mailing Address 26 UPLAND WAY	Transaction ID: SA11AI.48045
	City State Zip Code MATTAPOISETT MA 02739	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation USS TRANSPORT, LLC Chief Mate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) <input type="checkbox"/> Aggregate Year-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	1000.00
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 18 / 46
	<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) MARK D KERR	Date of Receipt MM / DD / YYYY 04 / 28 / 2008
	Mailing Address 6410 NW 34TH AVENUE	Transaction ID: SA11AI.48154
	City State Zip Code FT. LAUDERDALE FL 33309	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) DAVID LOISON	Date of Receipt MM / DD / YYYY 04 / 16 / 2008
	Mailing Address 8501 ASTRONAUT BLVD, #5-170	Transaction ID: SA11AI.48033
	City State Zip Code CAPE CANAVERAL FL 32920	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation 3PSC, LLC 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) REX M LOWMAN	Date of Receipt MM / DD / YYYY 04 / 25 / 2008
	Mailing Address 1413 GARY STREET	Transaction ID: SA11AI.48146
	City State Zip Code CHENEY WA 99004	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MAERSK LINE LTD 1st Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

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 19 / 46
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A.	Full Name (Last, First, Middle Initial) JOHN H MC ANINLEY		Date of Receipt	
	Mailing Address 615 HOWARD CREEK LANE		M M / D D / Y Y Y Y Y 0 4 / 0 8 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.47897
	STUART	FL	34994	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP		Occupation Master		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

B.	Full Name (Last, First, Middle Initial) RYAN B MC GEEHAN		Date of Receipt	
	Mailing Address 375 13TH AVE		M M / D D / Y Y Y Y Y 0 4 / 2 3 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.48116
	BETHLEHEM	PA	18018	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer MAERSK LINE LTD		Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

C.	Full Name (Last, First, Middle Initial) EARL B MORRILL		Date of Receipt	
	Mailing Address 16 BOW STREET		M M / D D / Y Y Y Y Y 0 4 / 2 4 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.48128
	NORTHWOOD	NH	03261	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		100.00	
Name of Employer INTEROCEAN AMERICAN SHIPPING CORP		Occupation Chief Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	▶	900.00
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 20 / 46
(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)
GARY A NEWBEGIN

Mailing Address 72 BEAR HEAD RD RTE 176

City State Zip Code
SEDGWICK ME 04676

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

Name of Employer Occupation
EXPANDER TRANS./MAERSK Chief Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.47903

Amount of Each Receipt this Period
400.00

B. Full Name (Last, First, Middle Initial)
BRIAN O'HANLON

Mailing Address 632 S GOLFVIEW DR

City State Zip Code
LAPLACE LA 70068

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

Name of Employer Occupation
VARIOUS SHIPPING COMPANIES

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.47756

Amount of Each Receipt this Period
400.00

C. Full Name (Last, First, Middle Initial)
THOMAS W OLIVER

Mailing Address 362 GULF BREEZE PKWY #153

City State Zip Code
GULF BREEZE FL 32561

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

Name of Employer Occupation
AMERICAN OVERSEAS MARINE Chief Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 6 / 2 0 0 8

Transaction ID: SA11AI.48017

Amount of Each Receipt this Period
400.00

SUBTOTAL of Receipts This Page (optional) ► 1200.00

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 21 / 46
(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)
EDWARD D PFAEFFLE

Mailing Address 1327 THE HIDEOUT

City State Zip Code
LAKE ARIEL PA 18436

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

Name of Employer Occupation
OCEAN SHIPS, INC. Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.47825

Amount of Each Receipt this Period
400.00

B.

Full Name (Last, First, Middle Initial)
EDWARD PILLERT

Mailing Address 46-049 ALIIANELLA
PL. #1722

City State Zip Code
KANEOHE HI 96744

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

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP Master

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.47967

Amount of Each Receipt this Period
200.00

C.

Full Name (Last, First, Middle Initial)
WILLIAM H PIMM

Mailing Address 173 ROYAL DRIVE

City State Zip Code
BRICK NJ 08723

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

Name of Employer Occupation
MAERSK LINE LTD Chief Engineer

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 3 / 2 0 0 8

Transaction ID: SA11AI.47814

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **900.00**

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 22 / 46
(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)
WILLIAM H PIMM

Mailing Address 173 ROYAL DRIVE

City State Zip Code
BRICK NJ 08723

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

Name of Employer Occupation
MAERSK LINE LTD Chief Engineer

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 600.00

Date of Receipt

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

Transaction ID: SA11AI.47844

Amount of Each Receipt this Period
300.00

B.

Full Name (Last, First, Middle Initial)
WILLIAM H PIMM

Mailing Address 173 ROYAL DRIVE

City State Zip Code
BRICK NJ 08723

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

Name of Employer Occupation
MAERSK LINE LTD Chief 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 4 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.47849

Amount of Each Receipt this Period
-300.00

C.

Full Name (Last, First, Middle Initial)
PERRY L PLUNKETT

Mailing Address 925 S WILDROSE DR

City State Zip Code
BREA CA 92821

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

Name of Employer Occupation
TRANSOCEANIC CABLE SHIP 2nd Mate

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

Date of Receipt

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

Transaction ID: SA11AI.47801

Amount of Each Receipt this Period
250.00

SUBTOTAL of Receipts This Page (optional) ▶

250.00

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 23 / 46
	(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) SCOT PORTER	Date of Receipt MM / DD / YYYY 04 / 02 / 2008
	Mailing Address 2979 KALAKAUA AVE APT. 605	Transaction ID: SA11AI.47791
	City State Zip Code HONOLULU HI 96815	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B.	Full Name (Last, First, Middle Initial) MICHAEL J REPKO	Date of Receipt MM / DD / YYYY 04 / 07 / 2008
	Mailing Address 334 LEEWOOD ROAD	Transaction ID: SA11AI.47862
	City State Zip Code HOLLY SPRINGS MS 38635	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP 2nd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) WENDELL R SPRAGUE	Date of Receipt MM / DD / YYYY 04 / 23 / 2008
	Mailing Address 7301 RANCH RD 620 N. STE 155 BOX 173	Transaction ID: SA11AI.48109
	City State Zip Code AUSTIN TX 78726	Amount of Each Receipt this Period 200.00
	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	

SUBTOTAL of Receipts This Page (optional)	900.00
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 24 / 46
	(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) PETER R WHITING		Date of Receipt
Mailing Address 30 SE 11TH STREET		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 2 1 / 2 0 0 8
City	State	Zip Code
POMPANO BEACH	FL	33060
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.48081
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 100.00
Name of Employer USS TRANSPORT, LLC	Occupation Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text"/> 250.00	

B.

Full Name (Last, First, Middle Initial) SIMO ZATEZALO		Date of Receipt
Mailing Address 602 PALMERA DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 0 4 / 0 1 / 2 0 0 8
City	State	Zip Code
PONTE VEDRA BEACH	FL	32082
FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.47770
C <input type="text"/>		Amount of Each Receipt this Period
		<input type="text"/> 300.00
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 ▼	
	<input type="text"/> 300.00	

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 400.00
TOTAL This Period (last page this line number only)	<input type="text"/> 15920.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 25 / 46
(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)
FRIENDS OF JIM SAXTON

Mailing Address PO BOX 795

City State Zip Code
MOUNT HOLLY NJ 08060

FEC ID number of contributing federal political committee. **C** C00197699

Name of Employer Occupation

Receipt For: 2008
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2000.00

Date of Receipt
M M / D D / Y Y Y Y
0 4 / 1 4 / 2 0 0 8

Transaction ID: SA16.47749

Amount of Each Receipt this Period
2000.00

Refunded by Candidate

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

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)
A WHOLE LOT OF PEOPLE FOR GRIJALVA

Mailing Address P.O. BOX 1242

City TUCSON State AZ Zip Code 85702

Purpose of Disbursement
Contribution

Candidate Name
RAUL M MR. GRIJALVA

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AZ District: 07

Transaction ID: SB23.47691
Date of Disbursement

/ /

Amount of Each Disbursement this Period

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

Mailing Address PO Box 27

City Hollidaysburg State PA Zip Code 16648

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: SB23.47733
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CASTLE CAMPAIGN FUND

Mailing Address PO Box 133

City Wilmington State DE Zip Code 19899

Purpose of Disbursement
Contribution

Candidate Name
MICHAEL N CASTLE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: DE District: 01

Transaction ID: SB23.47700
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)
CHET EDWARDS FOR CONGRESS

Mailing Address PO BOX 23273

City WACO State TX Zip Code 76702

Purpose of Disbursement
Contribution

Candidate Name
CHET EDWARDS

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.47731
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
CITIZENS FOR BUNNING

Mailing Address 1717 DIXIE HIGHWAY SUITE 180

City FT WRIGHT State KY Zip Code 41011

Purpose of Disbursement
Contribution

Candidate Name
JIM BUNNING

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: KY District: 00

Transaction ID: SB23.47734
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
CITIZENS FOR COCHRAN

Mailing Address PO BOX 7183

City TUPELO State MS Zip Code 38802

Purpose of Disbursement
Contribution

Candidate Name
THAD COCHRAN

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MS District: 00

Transaction ID: SB23.47730
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

<p>A. Full Name (Last, First, Middle Initial) COLEMAN FOR SENATE 08</p> <p>Mailing Address 680 TRANSFER ROAD SUITE A</p> <p>City ST PAUL State MN Zip Code 55114</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name NORM COLEMAN</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47718 Date of Disbursement 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT GARY ACKERMAN</p> <p>Mailing Address 100 JERICHO QUADRANGLE SUITE 233</p> <p>City JERICHO State NY Zip Code 11753</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name GARY L. ACKERMAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 05</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47717 Date of Disbursement 04 / 24 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT MCHUGH</p> <p>Mailing Address 228 S. Washington St. Ste. 115 SUITE 115</p> <p>City Alexandria State VA Zip Code 22314</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOHN M MCHUGH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 23</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47736 Date of Disbursement 04 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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) CONGRESSMAN BART GORDON COMMITTEE	Transaction ID: SB23.47735 Date of Disbursement 04 / 24 / 2008
	Mailing Address P.O. BOX 2008	Amount of Each Disbursement this Period 1000.00
	City MURFREESBORO State TN Zip Code 37133	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name BART GORDON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN 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) Costello for Congress Committee	Transaction ID: SB23.47692 Date of Disbursement 04 / 04 / 2008
	Mailing Address P. O. Box 8250	Amount of Each Disbursement this Period 2500.00
	City Belleville State IL Zip Code 62222	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JERRY F COSTELLO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Costello for Congress Committee	Transaction ID: SB23.47728 Date of Disbursement 04 / 30 / 2008
	Mailing Address P. O. Box 8250	Amount of Each Disbursement this Period 500.00
	City Belleville State IL Zip Code 62222	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JERRY F COSTELLO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 12	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

<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) Costello for Congress Committee	Transaction ID: SB23.47729 Date of Disbursement
	Mailing Address P. O. Box 8250	<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City Belleville State IL Zip Code 62222	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="500.00"/>
	Candidate Name JERRY F COSTELLO	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: IL District: 12	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE	Transaction ID: SB23.47698 Date of Disbursement
	Mailing Address PO BOX 1631	<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City BALTIMORE State MD Zip Code 21203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name ELIJAH E CUMMINGS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: MD District: 07	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CUMMINGS FOR CONGRESS CAMPAIGN COMMITTEE	Transaction ID: SB23.47699 Date of Disbursement
	Mailing Address PO BOX 1631	<input type="text" value="04"/> / <input type="text" value="11"/> / <input type="text" value="2008"/>
	City BALTIMORE State MD Zip Code 21203	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1500.00"/>
	Candidate Name ELIJAH E CUMMINGS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: MD District: 07	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

<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) DEFAZIO FOR CONGRESS	Transaction ID: SB23.47727
	Mailing Address PO Box 1316	Date of Disbursement 04 / 30 / 2008
	City Springfield State OR Zip Code 97477	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name PETER A DEFAZIO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: OR District: 04	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DREIER FOR CONGRESS COMMITTEE	Transaction ID: SB23.47716
	Mailing Address P.O. BOX 505	Date of Disbursement 04 / 24 / 2008
	City UPLAND State CA Zip Code 91785	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name DAVID DREIER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: CA District: 26	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DUNCAN FOR CONGRESS	Transaction ID: SB23.47715
	Mailing Address PO BOX 2646	Date of Disbursement 04 / 24 / 2008
	City KNOXVILLE State TN Zip Code 37901	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOHN REP. JR. DUNCAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: TN District: 02	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

<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 FOR HARRY REID	Transaction ID: SB23.47701 Date of Disbursement 04 / 11 / 2008
	Mailing Address PO BOX 19163	Amount of Each Disbursement this Period 2000.00
	City LAS VEGAS State NV Zip Code 89132	
	Purpose of Disbursement Contribution Candidate Name HARRY REID Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 00	Category/Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) FRIENDS OF BYRON DORGAN	Transaction ID: SB23.47726 Date of Disbursement 04 / 30 / 2008
	Mailing Address PO BOX 871	Amount of Each Disbursement this Period 1000.00
	City BISMARCK State ND Zip Code 58502	
	Purpose of Disbursement Contribution Candidate Name BYRON L DORGAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) FRIENDS OF FARR	Transaction ID: SB23.47702 Date of Disbursement 04 / 11 / 2008
	Mailing Address 555 CAPITOL MALL SUITE 1425	Amount of Each Disbursement this Period 1000.00
	City SACRAMENTO State CA Zip Code 95814	
	Purpose of Disbursement Contribution Candidate Name SAM FARR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 17	Category/Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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 SHERROD BROWN	Transaction ID: SB23.47737 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 8	
	Mailing Address PO BOX 76187 Suite 800		Amount of Each Disbursement this Period 1000.00
	City WASHINGTON State DC Zip Code 20013		
	Purpose of Disbursement Contribution Candidate Name SHERROD BROWN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
B.	Full Name (Last, First, Middle Initial) GENE TAYLOR FOR CONGRESS COMMITTEE	Transaction ID: SB23.47714 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 4 / 2 0 0 8	
	Mailing Address Post Office Box 38 POST OFFICE BOX 38		Amount of Each Disbursement this Period 1000.00
	City Bay St. Louis State MS Zip Code 39520		
	Purpose of Disbursement Contribution Candidate Name GENE MR. TAYLOR Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 04 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	
C.	Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS	Transaction ID: SB23.47693 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8	
	Mailing Address PO Box 12886		Amount of Each Disbursement this Period 1500.00
	City Tucson State AZ Zip Code 85732		
	Purpose of Disbursement Contribution Candidate Name GABRIELLE GIFFORDS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	3500.00
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) HASTINGS FOR CONGRESS Mailing Address P.O. BOX 9352 P.O. BOX 9352 City FT. LAUDERDALE State FL Zip Code 33310 Purpose of Disbursement Contribution Candidate Name ALCEE L HASTINGS 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: FL District: 23	Transaction ID: SB23.47705 Date of Disbursement 04 / 11 / 2008	Amount of Each Disbursement this Period 1500.00
B.	Full Name (Last, First, Middle Initial) HILLARY CLINTON FOR PRESIDENT Mailing Address PO Box 101436 City Arlington State VA Zip Code 22210 Purpose of Disbursement Contribution Candidate Name HILLARY RODHAM CLINTON Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: SB23.47738 Date of Disbursement 04 / 18 / 2008	Amount of Each Disbursement this Period 2300.00
C.	Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL Mailing Address PO Box 1071 City Seymour State IN Zip Code 47274 Purpose of Disbursement Contribution Candidate Name BARON P HILL 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: IN District: 09	Transaction ID: SB23.47724 Date of Disbursement 04 / 30 / 2008	Amount of Each Disbursement this Period 1500.00

SUBTOTAL of Disbursements This Page (optional) ▶	5300.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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) HOOSIERS SUPPORTING BUYER FOR CONGRESS	Transaction ID: SB23.47739
	Mailing Address 200 NORTH MAIN ST PO BOX 712	Date of Disbursement MM / DD / YYYY 04 / 18 / 2008
	City MONTICELLO	State IN
	Zip Code 47960	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name STEVE CONGRESSMAN BUYER	
	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: IN District: 04	

B.	Full Name (Last, First, Middle Initial) IKE SKELTON FOR CONGRESS COMMITTEE	Transaction ID: SB23.47740
	Mailing Address P.O. BOX A	Date of Disbursement MM / DD / YYYY 04 / 18 / 2008
	City HARRISONVILLE	State MO
	Zip Code 64701	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name IKE SKELTON	
	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: MO District: 04	

C.	Full Name (Last, First, Middle Initial) KAPTUR FOR CONGRESS	Transaction ID: SB23.47741
	Mailing Address P.O. Box 899	Date of Disbursement MM / DD / YYYY 04 / 18 / 2008
	City Toledo	State OH
	Zip Code 43697	Amount of Each Disbursement this Period 1500.00
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name MARCY KAPTUR	
	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: OH District: 09	

SUBTOTAL of Disbursements This Page (optional)	3500.00
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

<p>A.</p> <p>Full Name (Last, First, Middle Initial) KEN CALVERT FOR CONGRESS</p> <p>Mailing Address PO BOX 20123</p> <p>City RIVERSIDE State CA Zip Code 92516</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name KEN MR. CALVERT</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 44</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47742</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 8 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) KNOLLENBERG FOR CONGRESS COMMITTEE</p> <p>Mailing Address 31000 TELEGRAPH ROAD #110</p> <p>City BINGHAM FARMS State MI Zip Code 48025</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOSEPH K. KNOLLENBERG</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47688</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) KNOLLENBERG FOR CONGRESS COMMITTEE</p> <p>Mailing Address 31000 TELEGRAPH ROAD #110</p> <p>City BINGHAM FARMS State MI Zip Code 48025</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name JOSEPH K. KNOLLENBERG</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 09</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.47689</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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) LATOURETTE FOR CONGRESS	Transaction ID: SB23.47694 Date of Disbursement 04 / 04 / 2008
	Mailing Address 320 KENARDEN DRIVE	Amount of Each Disbursement this Period 1000.00
	City HIGHLAND HGTS State OH Zip Code 44143	
	Purpose of Disbursement Contribution	
	Candidate Name STEVEN C LATOURETTE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LATOURETTE FOR CONGRESS	Transaction ID: SB23.47722 Date of Disbursement 04 / 30 / 2008
	Mailing Address 320 KENARDEN DRIVE	Amount of Each Disbursement this Period 1000.00
	City HIGHLAND HGTS State OH Zip Code 44143	
	Purpose of Disbursement Contribution	
	Candidate Name STEVEN C LATOURETTE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) LATOURETTE FOR CONGRESS	Transaction ID: SB23.47723 Date of Disbursement 04 / 30 / 2008
	Mailing Address 320 KENARDEN DRIVE	Amount of Each Disbursement this Period 1500.00
	City HIGHLAND HGTS State OH Zip Code 44143	
	Purpose of Disbursement Contribution	
	Candidate Name STEVEN C LATOURETTE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 14	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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) LAUTENBERG FOR SENATE Mailing Address RIVERFRONT PLAZA STATION PO BOX 200596 City NEWARK State NJ Zip Code 07102 Purpose of Disbursement Contribution Candidate Name FRANK R LAUTENBERG 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: NJ District: 00	Transaction ID: SB23.47713 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) LAUTENBERG FOR SENATE Mailing Address RIVERFRONT PLAZA STATION PO BOX 200596 City NEWARK State NJ Zip Code 07102 Purpose of Disbursement Contribution Candidate Name FRANK R LAUTENBERG 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: NJ District: 00	Transaction ID: SB23.47719 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 1500.00
C.	Full Name (Last, First, Middle Initial) LISA MURKOWSKI - U S SENATE Mailing Address PO BOX 100847 City ANCHORAGE State AK Zip Code 99510 Purpose of Disbursement Contribution Candidate Name LISA MURKOWSKI 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: AK District: 00	Transaction ID: SB23.47712 Date of Disbursement 04 / 24 / 2008 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	3500.00
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. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 730
C/O C. BRUCE LAWRENCE

City Honeoye State NY Zip Code 14471

Purpose of Disbursement
Contribution

Candidate Name
LOUISE MCINTOSH SLAUGHTER

Office Sought: House Senate President
State: NY District: 28
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.47732

Date of Disbursement

04 / 18 / 2008

Amount of Each Disbursement this Period

1000.00

B. LOUISE SLAUGHTER RE-ELECTION COMMITTEE

Full Name (Last, First, Middle Initial)

Mailing Address P.O. Box 730
C/O C. BRUCE LAWRENCE

City Honeoye State NY Zip Code 14471

Purpose of Disbursement
Contribution

Candidate Name
LOUISE MCINTOSH SLAUGHTER

Office Sought: House Senate President
State: NY District: 28
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.47743

Date of Disbursement

04 / 18 / 2008

Amount of Each Disbursement this Period

1500.00

C. LUCAS FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1726

City OKLAHOMA CITY State OK Zip Code 73101

Purpose of Disbursement
Contribution

Candidate Name
FRANK D LUCAS

Office Sought: House Senate President
State: OK District: 03
Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.47697

Date of Disbursement

04 / 11 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

3500.00

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) MCNERNEY FOR CONGRESS	Transaction ID: SB23.47721 Date of Disbursement 04 / 30 / 2008
	Mailing Address 6520 VILLAGE PARKWAY	Amount of Each Disbursement this Period 1000.00
	City DUBLIN State CA Zip Code 94568	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JERRY MCNERNEY	
	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: 11	

B.	Full Name (Last, First, Middle Initial) MURTHA FOR CONGRESS COMMITTEE	Transaction ID: SB23.47706 Date of Disbursement 04 / 11 / 2008
	Mailing Address Suite 220 551 Main Street BT FINANCIAL PLAZA SUITE 220	Amount of Each Disbursement this Period 1500.00
	City JOHNSTOWN State PA Zip Code 15901	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOHN P MR. MURTHA	
	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: PA District: 12	

C.	Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY US SENATE	Transaction ID: SB23.47695 Date of Disbursement 04 / 04 / 2008
	Mailing Address PO BOX 3662	Amount of Each Disbursement this Period 1500.00
	City SEATTLE State WA Zip Code 98124	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name PATTY MURRAY	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WA District: 00	

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

A.

Full Name (Last, First, Middle Initial)
RADANOVICH FOR CONGRESS

Mailing Address 30151 TOMAS STREET

City RANCHO STA MRGRITA State CA Zip Code 92688

Purpose of Disbursement
Contribution

Candidate Name
GEORGE RADANOVICH

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 19

Transaction ID: SB23.47707

Date of Disbursement

04 / 11 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
REPUBLICAN MAJORITY FUND

Mailing Address PO BOX 144
Suite 300

City ALEXANDRIA State VA Zip Code 22313

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.47696

Date of Disbursement

04 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)
SESTAK FOR CONGRESS

Mailing Address P.O. Box 16

City Media State PA Zip Code 19063

Purpose of Disbursement
Contribution

Candidate Name
JOSEPH A. JR. SESTAK

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: PA District: 07

Transaction ID: SB23.47690

Date of Disbursement

04 / 01 / 2008

Amount of Each Disbursement this Period

3000.00

SUBTOTAL of Disbursements This Page (optional) ►

9000.00

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)
SHEILA JACKSON LEE FOR CONGRESS

Mailing Address 3401 LABRANCH

City HOUSTON State TX Zip Code 77004

Purpose of Disbursement
Contribution

Candidate Name
SHEILA JACKSON LEE

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 18

Transaction ID: SB23.47750
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
TEAM EMERSON FOR JO ANN EMERSON

Mailing Address PO BOX 822

City CAPE GIRARDEAU State MO Zip Code 63702

Purpose of Disbursement
Contribution

Candidate Name
JOANN EMERSON

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: MO District: 08

Transaction ID: SB23.47744
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
TEAM SUNUNU

Mailing Address PO BOX 500

City RYE State NH Zip Code 03870

Purpose of Disbursement
Contribution

Candidate Name
JOHN E SUNUNU

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NH District: 01

Transaction ID: SB23.47708
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)
TIM RYAN FOR CONGRESS

Transaction ID: SB23.47711

Date of Disbursement

Mailing Address 1600 Roosevelt Avenue
Suite 804

/ /

City Niles State OH Zip Code 44446

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
TIMOTHY J RYAN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: OH District: 17

B.

Full Name (Last, First, Middle Initial)
WALTER JONES FOR CONGRESS COMMITTEE

Transaction ID: SB23.47710

Date of Disbursement

Mailing Address PO BOX 99667

/ /

City RALEIGH State NC Zip Code 27624

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
WALTER B JONES

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NC District: 03

C.

Full Name (Last, First, Middle Initial)
WOOLSEY FOR CONGRESS

Transaction ID: SB23.47709

Date of Disbursement

Mailing Address P.O. BOX 750176

/ /

City PETALUMA State CA Zip Code 94975

Amount of Each Disbursement this Period

Purpose of Disbursement
Contribution

Category/
Type

Candidate Name
LYNN C WOOLSEY

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: CA District: 06

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)

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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)

ZACK SPACE FOR CONGRESS COMMITTEE

Mailing Address 123 West High Avenue

City State Zip Code
New Philadelphia OH 44663

Purpose of Disbursement
Contribution

Candidate Name
ZACHARY T SPACE

Office Sought: House
 Senate
 President

State: OH District: 18

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.47720

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)

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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)

ERICH W DOLL

Mailing Address 11800 HERRICK LANE

City State Zip Code
LOUISVILLE KY 40243

Purpose of Disbursement
Refund Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB28A.47746

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)