

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 International Longshore and Warehouse Union -- Political Action Fund

ADDRESS (number and street) 1188 Franklin Street San Francisco CA 94109 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00176214 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

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

5. Covering Period 10 / 01 / 2015 through 10 / 31 / 2015

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 William E. Adams

Signature of Treasurer William E. Adams [Electronically Filed] Date 11 / 04 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**International Longshore and Warehouse Union -- Political Action Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		332214.89
(b) Cash on Hand at Beginning of Reporting Period.....	330757.12	
(c) Total Receipts (from Line 19) .....	6486.11	74202.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	337243.23	406417.23
7. Total Disbursements (from Line 31).....	6250.00	75424.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	330993.23	330993.23
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**International Longshore and Warehouse Union -- Political Action Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5539.11	41351.11
(ii) Unitemized .....	947.00	32851.23
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6486.11	74202.34
(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) .....	6486.11	74202.34
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	6486.11	74202.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6486.11	74202.34

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	6000.00	74950.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	250.00	474.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	6250.00	75424.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	6250.00	75424.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6486.11	74202.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6486.11	74202.34
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. KANE K AHUNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5903 NE 23RD AVE  
 City PORTLAND State OR Zip Code 97211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015  
**Transaction ID : SA11AI.97642**  
 Amount of Each Receipt this Period  
 5.00

**B. KANE K AHUNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5903 NE 23RD AVE  
 City PORTLAND State OR Zip Code 97211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97649**  
 Amount of Each Receipt this Period  
 5.00

**C. KANE K AHUNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5903 NE 23RD AVE  
 City PORTLAND State OR Zip Code 97211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : SA11AI.97656**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. RUDY ALBA Sr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1400 S TROTWOOD Ave  
City SAN PEDRO State CA Zip Code 90732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PMA Occupation Lpngshoreman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00

Date of Receipt  
10 / 01 / 2015  
**Transaction ID : SA11AI.97696**  
Amount of Each Receipt this Period 25.00

**B. RUDY ALBA Sr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1400 S TROTWOOD Ave  
City SAN PEDRO State CA Zip Code 90732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PMA Occupation Lpngshoreman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 725.00

Date of Receipt  
10 / 08 / 2015  
**Transaction ID : SA11AI.97706**  
Amount of Each Receipt this Period 25.00

**C. RUDY ALBA Sr**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1400 S TROTWOOD Ave  
City SAN PEDRO State CA Zip Code 90732  
FEC ID number of contributing federal political committee. **C**  
Name of Employer PMA Occupation Lpngshoreman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 750.00

Date of Receipt  
10 / 15 / 2015  
**Transaction ID : SA11AI.97716**  
Amount of Each Receipt this Period 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 8 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. RUDY ALBA Sr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 S TROTWOOD Ave  
 City SAN PEDRO State CA Zip Code 90732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Lpngshoreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 775.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2015  
**Transaction ID : SA11AI.97726**  
 Amount of Each Receipt this Period  
 25.00

**B. 1 Matthew J Arakawa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 Atkinson Dr  
 City HONOLULU State HI Zip Code 96814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU Local 142 Occupation Union Official  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97499**  
 Amount of Each Receipt this Period  
 25.00

**C. 1 Matthew J Arakawa**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 Atkinson Dr  
 City HONOLULU State HI Zip Code 96814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU Local 142 Occupation Union Official  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97500**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 9 OF 90
<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARIO ARTEAGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2549 EAST 220TH ST

City LONG BEACH State CA Zip Code 90810

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **10 / 01 / 2015**

**Transaction ID : SA11AI.97567**

Amount of Each Receipt this Period **10.00**

**B. MARIO ARTEAGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2549 EAST 220TH ST

City LONG BEACH State CA Zip Code 90810

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 08 / 2015**

**Transaction ID : SA11AI.97573**

Amount of Each Receipt this Period **10.00**

**C. MARIO ARTEAGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2549 EAST 220TH ST

City LONG BEACH State CA Zip Code 90810

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **10 / 15 / 2015**

**Transaction ID : SA11AI.97579**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARIO ARTEAGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2549 EAST 220TH ST

City LONG BEACH      State CA      Zip Code 90810

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

Name of Employer Pacific Maritime Association      Occupation Longshore Worker

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 22 / 2015**

**Transaction ID : SA11AI.97585**

Amount of Each Receipt this Period **10.00**

**B. MARIO ARTEAGA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2549 EAST 220TH ST

City LONG BEACH      State CA      Zip Code 90810

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

Name of Employer Pacific Maritime Association      Occupation Longshore Worker

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt **10 / 29 / 2015**

**Transaction ID : SA11AI.97591**

Amount of Each Receipt this Period **10.00**

**C. WILLIAM B BALDWIN**  
Full Name (Last, First, Middle Initial)

Mailing Address 8045 MONACO # 62

City STANTON      State CA      Zip Code 90680

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

Name of Employer Pacific Maritime Association      Occupation Longshore Worker

Receipt For:  Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **935.00**

Date of Receipt **10 / 01 / 2015**

**Transaction ID : SA11AI.97763**

Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **25.00**

**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 11 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="01"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97764</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="955.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97765</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="960.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97766</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="980.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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 12 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B BALDWIN</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2015 <b>Transaction ID : SA11AI.97767</b>		
Mailing Address 8045 MONACO # 62			Amount of Each Receipt this Period 5.00		
City STANTON	State CA	Zip Code 90680			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 985.00			

Full Name (Last, First, Middle Initial) <b>B. WILLIAM B BALDWIN</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 15 / 2015 <b>Transaction ID : SA11AI.97768</b>		
Mailing Address 8045 MONACO # 62			Amount of Each Receipt this Period 20.00		
City STANTON	State CA	Zip Code 90680			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1005.00			

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 22 / 2015 <b>Transaction ID : SA11AI.97769</b>		
Mailing Address 8045 MONACO # 62			Amount of Each Receipt this Period 5.00		
City STANTON	State CA	Zip Code 90680			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1010.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 OF 90
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680	<b>Transaction ID : SA11AI.97770</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1030.00"/>		

Full Name (Last, First, Middle Initial) <b>B. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680	<b>Transaction ID : SA11AI.97771</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1035.00"/>		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680	<b>Transaction ID : SA11AI.97772</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="1055.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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 14 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. SUSAN SPANTON BARKER</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97760</b>
Mailing Address 21804 MOUNTAIN HWY E PMB 98			Amount of Each Receipt this Period 25.00
City SPANAWAY	State WA	Zip Code 98387	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 950.00
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. SUSAN SPANTON BARKER</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97761</b>
Mailing Address 21804 MOUNTAIN HWY E PMB 98			Amount of Each Receipt this Period 25.00
City SPANAWAY	State WA	Zip Code 98387	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 975.00
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. SUSAN SPANTON BARKER</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97762</b>
Mailing Address 21804 MOUNTAIN HWY E PMB 98			Amount of Each Receipt this Period 25.00
City SPANAWAY	State WA	Zip Code 98387	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 1000.00
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DOUGLAS R. CAREY</b>			Date of Receipt
Mailing Address 13526 SE Sherman			<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97233	<b>Transaction ID : SA11AI.97641</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="205.00"/>		

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS R. CAREY</b>			Date of Receipt
Mailing Address 13526 SE Sherman			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97233	<b>Transaction ID : SA11AI.97648</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS R. CAREY</b>			Date of Receipt
Mailing Address 13526 SE Sherman			<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97233	<b>Transaction ID : SA11AI.97655</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="5.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="215.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15.00"/>
<b>TOTAL</b> 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 16 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 1 ROBERT CARRILLO**

Full Name (Last, First, Middle Initial)  
Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **409.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 01 / 2015**

**Transaction ID : SA11AI.97475**

Amount of Each Receipt this Period  
**10.50**

**B. 1 ROBERT CARRILLO**

Full Name (Last, First, Middle Initial)  
Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 08 / 2015**

**Transaction ID : SA11AI.97478**

Amount of Each Receipt this Period  
**10.50**

**C. 1 ROBERT CARRILLO**

Full Name (Last, First, Middle Initial)  
Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2015**

**Transaction ID : SA11AI.97481**

Amount of Each Receipt this Period  
**10.50**

**SUBTOTAL** of Receipts This Page (optional)..... **31.50**

**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 17 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 1 ROBERT CARRILLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 441.00

Date of Receipt 10 / 22 / 2015  
**Transaction ID : SA11AI.97485**

Amount of Each Receipt this Period 10.50

**B. 1 ROBERT CARRILLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 451.50

Date of Receipt 10 / 29 / 2015  
**Transaction ID : SA11AI.97489**

Amount of Each Receipt this Period 10.50

**C. DESIDERIO c CHAVEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 11126 DUNE STREET

City NORWALK State CA Zip Code 90650

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt 10 / 01 / 2015  
**Transaction ID : SA11AI.97614**

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 31.00

**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 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DESIDERIO c CHAVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11126 DUNE STREET  
 City NORWALK State CA Zip Code 90650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **390.00**

Date of Receipt **10 / 08 / 2015**  
**Transaction ID : SA11AI.97615**  
 Amount of Each Receipt this Period **10.00**

**B. DESIDERIO c CHAVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11126 DUNE STREET  
 City NORWALK State CA Zip Code 90650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 15 / 2015**  
**Transaction ID : SA11AI.97616**  
 Amount of Each Receipt this Period **10.00**

**C. DESIDERIO c CHAVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11126 DUNE STREET  
 City NORWALK State CA Zip Code 90650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **410.00**

Date of Receipt **10 / 22 / 2015**  
**Transaction ID : SA11AI.97617**  
 Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**  
**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 19 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DESIDERIO c CHAVEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 11126 DUNE STREET  
 City NORWALK State CA Zip Code 90650  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 29 / 2015  
**Transaction ID : SA11AI.97618**  
 Amount of Each Receipt this Period  
 10.00

**B. PAUL CIRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 W. PASEO DEL MAR  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 01 / 2015  
**Transaction ID : SA11AI.97700**  
 Amount of Each Receipt this Period  
 10.00

**C. PAUL CIRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 W. PASEO DEL MAR  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 10 / 08 / 2015  
**Transaction ID : SA11AI.97710**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 20 OF 90  
(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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. PAUL CIRILLO**

Mailing Address 932 W. PASEO DEL MAR

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97720**

Amount of Each Receipt this Period  

10.00
-------

Full Name (Last, First, Middle Initial)  
**B. PAUL CIRILLO**

Mailing Address 932 W. PASEO DEL MAR

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : SA11AI.97730**

Amount of Each Receipt this Period  

10.00
-------

Full Name (Last, First, Middle Initial)  
**C. PAUL CIRILLO**

Mailing Address 932 W. PASEO DEL MAR

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : SA11AI.97739**

Amount of Each Receipt this Period  

10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Arthur A Clark Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 412 N 4th St

City TACOMA State WA Zip Code 98403

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97784**

Amount of Each Receipt this Period  
**5.00**

**B. Arthur A Clark Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 412 N 4th St

City TACOMA State WA Zip Code 98403

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97793**

Amount of Each Receipt this Period  
**5.00**

**C. JAKE COLLEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 4602 69TH AVE W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97811**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **20.00**

**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 22 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. JAKE COLLEN</b>		Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97813</b>
Mailing Address 4602 69TH AVE W		Amount of Each Receipt this Period 10.00
City UNIVERSITY PLACE	State WA	Zip Code 98466
FEC ID number of contributing federal political committee. C	Name of Employer Pacific Maritime Association	Occupation Longshore Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B. JAKE COLLEN</b>		Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97815</b>
Mailing Address 4602 69TH AVE W		Amount of Each Receipt this Period 10.00
City UNIVERSITY PLACE	State WA	Zip Code 98466
FEC ID number of contributing federal political committee. C	Name of Employer Pacific Maritime Association	Occupation Longshore Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) <b>C. ROGER CORDINER</b>		Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97443</b>
Mailing Address 23406 - 108st St Ct E		Amount of Each Receipt this Period 10.00
City BUCKLEY	State CA	Zip Code 98321
FEC ID number of contributing federal political committee. C	Name of Employer PMA	Occupation Longshore Worker
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. ROGER CORDINER**  
Full Name (Last, First, Middle Initial)

Mailing Address 23406 - 108st St Ct E

City BUCKLEY State CA Zip Code 98321

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
10 / 20 / 2015  
Transaction ID : SA11AI.97444

Amount of Each Receipt this Period  
10.00

**B. ROGER CORDINER**  
Full Name (Last, First, Middle Initial)

Mailing Address 23406 - 108st St Ct E

City BUCKLEY State CA Zip Code 98321

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
10 / 20 / 2015  
Transaction ID : SA11AI.97445

Amount of Each Receipt this Period  
10.00

**C. GERI R CRANSTON**  
Full Name (Last, First, Middle Initial)

Mailing Address 1917 NE 70TH AVE

City PORTLAND State OR Zip Code 97213

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
10 / 13 / 2015  
Transaction ID : SA11AI.97645

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25.00

**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 24 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GERI R CRANSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1917 NE 70TH AVE  
 City PORTLAND State OR Zip Code 97213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97652**  
 Amount of Each Receipt this Period  
 5.00

**B. GERI R CRANSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1917 NE 70TH AVE  
 City PORTLAND State OR Zip Code 97213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : SA11AI.97659**  
 Amount of Each Receipt this Period  
 5.00

**C. GEORGE R CRIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 LA GRANDE BLVD  
 City PUYALLUP State WA Zip Code 98373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97661**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20.00  
**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 25 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GEORGE R CRIM**  
Full Name (Last, First, Middle Initial)

Mailing Address 718 LA GRANDE BLVD

City PUYALLUP State WA Zip Code 98373

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97665**

Amount of Each Receipt this Period  
 10.00

**B. GEORGE R CRIM**  
Full Name (Last, First, Middle Initial)

Mailing Address 718 LA GRANDE BLVD

City PUYALLUP State WA Zip Code 98373

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97669**

Amount of Each Receipt this Period  
 10.00

**C. STEWART CROCKETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4819 N MCBRIDE ST

City TACOMA State WA Zip Code 98407

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 630.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97780**

Amount of Each Receipt this Period  
 15.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 35.00

**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 26 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. STEWART CROCKETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4819 N MCBRIDE ST

City TACOMA State WA Zip Code 98407

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **645.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97789**

Amount of Each Receipt this Period  
**15.00**

**B. STEWART CROCKETT**  
Full Name (Last, First, Middle Initial)

Mailing Address 4819 N MCBRIDE ST

City TACOMA State WA Zip Code 98407

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97800**

Amount of Each Receipt this Period  
**15.00**

**C. LYNN DE LUCA**  
Full Name (Last, First, Middle Initial)

Mailing Address 2223 JACK PL

City SAN PEDRO State CA Zip Code 90731-1128

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015

**Transaction ID : SA11AI.97699**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **40.00**

**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 27 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="10"/> / <input type="text" value="08"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.97709</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="225.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="10"/> / <input type="text" value="15"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.97719</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.97729</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="25.00"/>
<b>TOTAL</b> 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 28 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. LYNN DE LUCA**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2223 JACK PL  
City SAN PEDRO State CA Zip Code 90731-1128  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Longshore Worker  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **245.00**

Date of Receipt **10 / 29 / 2015**  
**Transaction ID : SA11AI.97738**  
Amount of Each Receipt this Period **5.00**

**B. Michael De Luca**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2223 JACK PLACE  
City SAN PEDRO State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Foreman  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **205.00**

Date of Receipt **10 / 22 / 2015**  
**Transaction ID : SA11AI.97725**  
Amount of Each Receipt this Period **5.00**

**C. Michael De Luca**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2223 JACK PLACE  
City SAN PEDRO State CA Zip Code 90731  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Foreman  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **210.00**

Date of Receipt **10 / 29 / 2015**  
**Transaction ID : SA11AI.97735**  
Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **15.00**  
**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 29 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Donna Domingo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2824 Kauhale St  
City KIHEI State HI Zip Code 96753-9634  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ILWU 142 Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : SA11AI.97520**  
Amount of Each Receipt this Period 25.00

**B. Donna Domingo**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2824 Kauhale St  
City KIHEI State HI Zip Code 96753-9634  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ILWU 142 Occupation Vice President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : SA11AI.97521**  
Amount of Each Receipt this Period 25.00

**C. MICHAEL S. EINSTOSS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1727 - 246th ST  
City LOMITA State CA Zip Code 90717  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Longshore Worker  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
10 / 15 / 2015  
**Transaction ID : SA11AI.97714**  
Amount of Each Receipt this Period 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 55.00  
**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 30 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MICHAEL S. EINSTOSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1727 - 246th ST

City LOMITA	State CA	Zip Code 90717
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : SA11AI.97724**

Amount of Each Receipt this Period  
5.00

**B. MICHAEL S. EINSTOSS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1727 - 246th ST

City LOMITA	State CA	Zip Code 90717
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : SA11AI.97734**

Amount of Each Receipt this Period  
5.00

**C. DAVID G ELLIOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 52042 SE Icenogle Loop

City SCAPPOOSE	State OR	Zip Code 97056
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	06	/	2015

**Transaction ID : SA11AI.97743**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 31 OF 90
<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DAVID G ELLIOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 52042 SE Icenogle Loop

City SCAPPOOSE State OR Zip Code 97056

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **10 / 13 / 2015**

**Transaction ID : SA11AI.97745**

Amount of Each Receipt this Period **10.00**

**B. DAVID G ELLIOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 52042 SE Icenogle Loop

City SCAPPOOSE State OR Zip Code 97056

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt **10 / 20 / 2015**

**Transaction ID : SA11AI.97747**

Amount of Each Receipt this Period **10.00**

**C. DAVID G ELLIOTT**  
Full Name (Last, First, Middle Initial)

Mailing Address 52042 SE Icenogle Loop

City SCAPPOOSE State OR Zip Code 97056

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt **10 / 27 / 2015**

**Transaction ID : SA11AI.97749**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**

**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 32 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Brent W Ericksen**  
Full Name (Last, First, Middle Initial)

Mailing Address 1029 PRINCETON ST

City TACOMA State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97461**

Amount of Each Receipt this Period  
**10.00**

**B. Brent W Ericksen**  
Full Name (Last, First, Middle Initial)

Mailing Address 1029 PRINCETON ST

City TACOMA State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97462**

Amount of Each Receipt this Period  
**10.00**

**C. Brent W Ericksen**  
Full Name (Last, First, Middle Initial)

Mailing Address 1029 PRINCETON ST

City TACOMA State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97463**

Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. TEDDY B ESPELETA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1126-A Aala PI

City MAKAWAO State HI Zip Code 96768-9604

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

Name of Employer ILWU 142 Occupation Local Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97600**

Amount of Each Receipt this Period  
**25.00**

**B. TEDDY B ESPELETA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1126-A Aala PI

City MAKAWAO State HI Zip Code 96768-9604

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

Name of Employer ILWU 142 Occupation Local Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97601**

Amount of Each Receipt this Period  
**25.00**

**C. GEORGE M ESPINOZA**  
Full Name (Last, First, Middle Initial)

Mailing Address 14819 SE BUSH ST

City PORTLAND State OR Zip Code 97236

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
**10 / 13 / 2015**

**Transaction ID : SA11AI.97644**

Amount of Each Receipt this Period  
**5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **55.00**

**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 34 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GEORGE M ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14819 SE BUSH ST  
 City PORTLAND State OR Zip Code 97236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97651**  
 Amount of Each Receipt this Period  
 5.00

**B. GEORGE M ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14819 SE BUSH ST  
 City PORTLAND State OR Zip Code 97236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : SA11AI.97658**  
 Amount of Each Receipt this Period  
 5.00

**C. CATHERINE FAMILATHE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23754 PASATIEMPO LN  
 City HARBOR CITY State CA Zip Code 90710-1414  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Clerk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 319.98

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015  
**Transaction ID : SA11AI.97476**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 35 OF 90  
(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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. CATHERINE FAMILATHE**

Mailing Address 23754 PASATIEMPO LN

City HARBOR CITY	State CA	Zip Code 90710-1414
---------------------	-------------	------------------------

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

Name of Employer Pacific Maritime Association	Occupation Clerk
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **329.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : SA11AI.97479**

Amount of Each Receipt this Period  

10.00
-------

Full Name (Last, First, Middle Initial)  
**B. CATHERINE FAMILATHE**

Mailing Address 23754 PASATIEMPO LN

City HARBOR CITY	State CA	Zip Code 90710-1414
---------------------	-------------	------------------------

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

Name of Employer Pacific Maritime Association	Occupation Clerk
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **339.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97482**

Amount of Each Receipt this Period  

10.00
-------

Full Name (Last, First, Middle Initial)  
**C. CATHERINE FAMILATHE**

Mailing Address 23754 PASATIEMPO LN

City HARBOR CITY	State CA	Zip Code 90710-1414
---------------------	-------------	------------------------

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

Name of Employer Pacific Maritime Association	Occupation Clerk
--	---------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **349.98**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : SA11AI.97486**

Amount of Each Receipt this Period  

10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. CATHERINE FAMILATHE**

Mailing Address 23754 PASATIEMPO LN

City Harbor City State CA Zip Code 90710-1414

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

Name of Employer Pacific Maritime Association Occupation Clerk

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **359.98**

Date of Receipt  
**10 / 29 / 2015**

**Transaction ID : SA11AI.97490**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**B. Paris Fernandez**

Mailing Address 95-967 Uku Wai St., #3707

City MILILANI State HI Zip Code 96789-6959

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

Name of Employer ILWU Local 142 Occupation Union Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97603**

Amount of Each Receipt this Period  
**10.50**

Full Name (Last, First, Middle Initial)  
**C. Amy L Frazee**

Mailing Address 874 Williams Lake Rd

City COLVILLE State WA Zip Code 99114

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

Name of Employer Retiree widow Occupation Retiree widow

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **5700.00**

Date of Receipt  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97455**

Amount of Each Receipt this Period  
**1000.00**

**SUBTOTAL** of Receipts This Page (optional)..... **1020.50**

**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 37 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 1 Guy Fujimura**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 13094

City AIEA	State HI	Zip Code 96701-8594
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU 142	Occupation Secty -Treas	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : SA11AI.97431**

Amount of Each Receipt this Period  
25.00

**B. 1 Guy Fujimura**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO BOX 13094

City AIEA	State HI	Zip Code 96701-8594
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU 142	Occupation Secty -Treas	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Date of Receipt  
10 / 20 / 2015  
**Transaction ID : SA11AI.97432**

Amount of Each Receipt this Period  
25.00

**C. JEFFRY A GREEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 3507 EAST 15TH STREET

City LONG BEACH	State CA	Zip Code 90804
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 235.00	

Date of Receipt  
10 / 01 / 2015  
**Transaction ID : SA11AI.97566**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JEFFRY A GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 238.61

Date of Receipt 10 / 08 / 2015  
**Transaction ID : SA11AI.97572**

Amount of Each Receipt this Period 3.61

**B. JEFFRY A GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.61

Date of Receipt 10 / 15 / 2015  
**Transaction ID : SA11AI.97578**

Amount of Each Receipt this Period 5.00

**C. JEFFRY A GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 248.61

Date of Receipt 10 / 22 / 2015  
**Transaction ID : SA11AI.97584**

Amount of Each Receipt this Period 5.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 13.61

**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 39 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JEFFRY A GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 253.61

Date of Receipt 10 / 29 / 2015  
**Transaction ID : SA11AI.97590**

Amount of Each Receipt this Period 5.00

**B. BOBBY J GUILLORY**  
Full Name (Last, First, Middle Initial)

Mailing Address 1910 ARGONNE Dr

City WALNUT CREEK State CA Zip Code 94598

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

Name of Employer Pacific Maritime Association Occupation Retired

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt 10 / 20 / 2015  
**Transaction ID : SA11AI.97829**

Amount of Each Receipt this Period 50.00

**C. Ronald Hakanson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 412.50

Date of Receipt 10 / 20 / 2015  
**Transaction ID : SA11AI.97779**

Amount of Each Receipt this Period 12.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 67.50

**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 40 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Ronald Hakanson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **425.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97788**

Amount of Each Receipt this Period  
**12.50**

**B. Ronald Hakanson**  
Full Name (Last, First, Middle Initial)

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **437.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97799**

Amount of Each Receipt this Period  
**12.50**

**C. RICHARD N. HAUGEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : SA11AI.97611**

Amount of Each Receipt this Period  
**5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**

**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 41 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. RICHARD N. HAUGEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97612**

Amount of Each Receipt this Period  
**5.00**

**B. RICHARD N. HAUGEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 27 / 2015**

**Transaction ID : SA11AI.97613**

Amount of Each Receipt this Period  
**5.00**

**C. TERRI L HEATH-GALTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 OAKHEATH DRIVE

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2015**

**Transaction ID : SA11AI.97483**

Amount of Each Receipt this Period  
**5.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>15.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. TERRI L HEATH-GALTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 OAKHEATH DRIVE

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
10 / 22 / 2015  
**Transaction ID : SA11AI.97487**

Amount of Each Receipt this Period  
**5.00**

**B. TERRI L HEATH-GALTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 OAKHEATH DRIVE

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt  
10 / 29 / 2015  
**Transaction ID : SA11AI.97491**

Amount of Each Receipt this Period  
**5.00**

**C. Anna Herrera**  
Full Name (Last, First, Middle Initial)

Mailing Address 4527 Linden

City LONG BEACH State CA Zip Code 90807

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  
10 / 01 / 2015  
**Transaction ID : SA11AI.97565**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **20.00**

**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 43 OF 90
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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

NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Anna Herrera**  
Full Name (Last, First, Middle Initial)

Mailing Address 4527 Linden

City LONG BEACH State CA Zip Code 90807

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt **10 / 08 / 2015**

**Transaction ID : SA11AI.97571**

Amount of Each Receipt this Period **10.00**

**B. Anna Herrera**  
Full Name (Last, First, Middle Initial)

Mailing Address 4527 Linden

City LONG BEACH State CA Zip Code 90807

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt **10 / 15 / 2015**

**Transaction ID : SA11AI.97577**

Amount of Each Receipt this Period **10.00**

**C. Anna Herrera**  
Full Name (Last, First, Middle Initial)

Mailing Address 4527 Linden

City LONG BEACH State CA Zip Code 90807

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **10 / 22 / 2015**

**Transaction ID : SA11AI.97583**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**

**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 44 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Anna Herrera</b>		Date of Receipt 10 / 29 / 2015 <b>Transaction ID : SA11AI.97589</b>
Mailing Address 4527 Linden		Amount of Each Receipt this Period 10.00
City LONG BEACH	State CA	Zip Code 90807
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B. Dillon M Hullinger</b>		Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97501</b>
Mailing Address 320 Ohua Ave #602		Amount of Each Receipt this Period 25.00
City HONOLULU	State HI	Zip Code 96815-3661
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU Local 142	Occupation Union Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 475.00	

Full Name (Last, First, Middle Initial) <b>C. Dillon M Hullinger</b>		Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97502</b>
Mailing Address 320 Ohua Ave #602		Amount of Each Receipt this Period 25.00
City HONOLULU	State HI	Zip Code 96815-3661
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU Local 142	Occupation Union Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2015  
**Transaction ID : SA11AI.97622**  
 Amount of Each Receipt this Period  
**10.00**

**B. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015  
**Transaction ID : SA11AI.97623**  
 Amount of Each Receipt this Period  
**10.00**

**C. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97624**  
 Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : SA11AI.97625**  
 Amount of Each Receipt this Period  
 10.00

**B. CARMEN JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4502 N 21st St  
 City TACOMA State WA Zip Code 98406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 420.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97776**  
 Amount of Each Receipt this Period  
 10.00

**C. CARMEN JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4502 N 21st St  
 City TACOMA State WA Zip Code 98406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97785**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 47 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. CARMEN JOHNSON**

Mailing Address 4502 N 21st St

City TACOMA State WA Zip Code 98406

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97795**

Amount of Each Receipt this Period  
**100.00**

Full Name (Last, First, Middle Initial)  
**B. Fred W Johnson**

Mailing Address 10419 - 194th ST CT E

City GRAHAM State WA Zip Code 98338

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 30 / 2015**

**Transaction ID : SA11AI.97466**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**C. Joanne Kealoha**

Mailing Address 1023 Kapahulu Ave #18

City HONOLULU State HI Zip Code 96816-1330

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

Name of Employer ILWU 142 Occupation Local Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97503**

Amount of Each Receipt this Period  
**60.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **110.00**

**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 48 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DAVID KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 3563 E J St

City TACOMA	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97777**

Amount of Each Receipt this Period

**B. DAVID KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 3563 E J St

City TACOMA	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97786**

Amount of Each Receipt this Period

**C. DAVID KING**  
Full Name (Last, First, Middle Initial)

Mailing Address 3563 E J St

City TACOMA	State WA	Zip Code 98404
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97796**

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 49 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Daniel Kitts</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2015
Mailing Address 1006 - 17th St NW			<b>Transaction ID : SA11AI.97662</b>
City PUYALLUP	State WA	Zip Code 98371	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) <b>B. Daniel Kitts</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2015
Mailing Address 1006 - 17th St NW			<b>Transaction ID : SA11AI.97666</b>
City PUYALLUP	State WA	Zip Code 98371	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. Daniel Kitts</b>			Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2015
Mailing Address 1006 - 17th St NW			<b>Transaction ID : SA11AI.97670</b>
City PUYALLUP	State WA	Zip Code 98371	Amount of Each Receipt this Period 10.00
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 410.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 50 OF 90  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 1 Desmond A Kochi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45-340 Kenela St  
 City KANEEOHE State HI Zip Code 96744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Div Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97513**  
 Amount of Each Receipt this Period  
 25.00

**B. 1 Desmond A Kochi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 45-340 Kenela St  
 City KANEEOHE State HI Zip Code 96744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Div Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97514**  
 Amount of Each Receipt this Period  
 25.00

**C. RICHARD J KREBSER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6211 BLACK LAKE BELMORE Rd SW  
 City OLYMPIA State WA Zip Code 98512  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 340.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97808**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 51 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. RICHARD J KREBSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City	State	Zip Code
OLYMPIA	WA	98512

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : SA11AI.97809**

Amount of Each Receipt this Period  

10.00
-------

**B. RICHARD J KREBSER**  
Full Name (Last, First, Middle Initial)

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City	State	Zip Code
OLYMPIA	WA	98512

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **360.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : SA11AI.97810**

Amount of Each Receipt this Period  

10.00
-------

**C. CARLOS KUTTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4102 MONOGRAM AVE

City	State	Zip Code
LAKEWOOD	CA	90713

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.97535**

Amount of Each Receipt this Period  

15.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>35.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. CARLOS KUTTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD	State CA	Zip Code 90713
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
555.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97538**

Amount of Each Receipt this Period  
15.00

**B. CARLOS KUTTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD	State CA	Zip Code 90713
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
570.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : SA11AI.97540**

Amount of Each Receipt this Period  
15.00

**C. CARLOS KUTTLER**  
Full Name (Last, First, Middle Initial)

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD	State CA	Zip Code 90713
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
585.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2015

**Transaction ID : SA11AI.97542**

Amount of Each Receipt this Period  
15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARVIN LAGARDE**  
Full Name (Last, First, Middle Initial)

Mailing Address 12691 MARTHA ANN DR

City LOS ALAMITOS State CA Zip Code 90720

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
10 / 15 / 2015  
**Transaction ID : SA11AI.97596**

Amount of Each Receipt this Period  
5.00

**B. MARVIN LAGARDE**  
Full Name (Last, First, Middle Initial)

Mailing Address 12691 MARTHA ANN DR

City LOS ALAMITOS State CA Zip Code 90720

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
10 / 22 / 2015  
**Transaction ID : SA11AI.97597**

Amount of Each Receipt this Period  
5.00

**C. MARVIN LAGARDE**  
Full Name (Last, First, Middle Initial)

Mailing Address 12691 MARTHA ANN DR

City LOS ALAMITOS State CA Zip Code 90720

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
10 / 29 / 2015  
**Transaction ID : SA11AI.97598**

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 15.00

**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 54 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. CHRISTOPHER J LINCOLN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 23001 La PIERRE Dr  
 City MOUNTLAKE TERRACE State WA Zip Code 98043  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 16 / 2015  
**Transaction ID : SA11AI.97605**  
 Amount of Each Receipt this Period  
 500.00

**B. MARK LOPEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1473 W SEPULVEDA ST  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 01 / 2015  
**Transaction ID : SA11AI.97698**  
 Amount of Each Receipt this Period  
 10.00

**C. MARK LOPEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1473 W SEPULVEDA ST  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2015  
**Transaction ID : SA11AI.97708**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. MARK LOPEZ**

Mailing Address 1473 W SEPULVEDA ST

City State Zip Code  
SAN PEDRO CA 90731

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

Name of Employer Occupation  
Pacific Maritime Association Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**410.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 15 / 2015**

**Transaction ID : SA11AI.97718**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**B. MARK LOPEZ**

Mailing Address 1473 W SEPULVEDA ST

City State Zip Code  
SAN PEDRO CA 90731

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

Name of Employer Occupation  
Pacific Maritime Association Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**420.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 22 / 2015**

**Transaction ID : SA11AI.97728**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**C. MARK LOPEZ**

Mailing Address 1473 W SEPULVEDA ST

City State Zip Code  
SAN PEDRO CA 90731

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

Name of Employer Occupation  
Pacific Maritime Association Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**430.00**

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
**10 / 29 / 2015**

**Transaction ID : SA11AI.97737**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**

**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 56 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1829 BARDALE Av

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **304.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.97693**

Amount of Each Receipt this Period  

8.00
------

**B. ANTHONY LUERA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1829 BARDALE Av

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **312.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : SA11AI.97703**

Amount of Each Receipt this Period  

8.00
------

**C. ANTHONY LUERA**  
Full Name (Last, First, Middle Initial)

Mailing Address 1829 BARDALE Av

City SAN PEDRO	State CA	Zip Code 90731
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97713**

Amount of Each Receipt this Period  

8.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>24.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY LUERA</b>			Date of Receipt 10 / 22 / 2015 <b>Transaction ID : SA11AI.97723</b>
Mailing Address 1829 BARDALE Av			Amount of Each Receipt this Period 8.00
City SAN PEDRO	State CA	Zip Code 90731	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 328.00
Name of Employer Pacific Maritime Association		Occupation Foreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. ANTHONY LUERA</b>			Date of Receipt 10 / 29 / 2015 <b>Transaction ID : SA11AI.97733</b>
Mailing Address 1829 BARDALE Av			Amount of Each Receipt this Period 8.00
City SAN PEDRO	State CA	Zip Code 90731	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 336.00
Name of Employer Pacific Maritime Association		Occupation Foreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MELVIN S MCCA</b>			Date of Receipt 10 / 20 / 2015 <b>Transaction ID : SA11AI.97778</b>
Mailing Address 101 S 62nd St			Amount of Each Receipt this Period 10.00
City TACOMA	State WA	Zip Code 98408	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 420.00
Name of Employer PMA		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	26.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MELVIN S MCCA**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 S 62nd St

City TACOMA State WA Zip Code 98408

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97787**

Amount of Each Receipt this Period  
**10.00**

**B. MELVIN S MCCA**  
Full Name (Last, First, Middle Initial)

Mailing Address 101 S 62nd St

City TACOMA State WA Zip Code 98408

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97797**

Amount of Each Receipt this Period  
**10.00**

**C. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97812**

Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City State Zip Code  
UNIVERSITY PLACE WA 98466

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

Name of Employer Occupation  
PMA Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
350.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SA11AI.97814**

Amount of Each Receipt this Period  
10.00

**B. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City State Zip Code  
UNIVERSITY PLACE WA 98466

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

Name of Employer Occupation  
PMA Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SA11AI.97816**

Amount of Each Receipt this Period  
10.00

**C. DONALD A. MEHNER**  
Full Name (Last, First, Middle Initial)

Mailing Address 16600 SE BEL AIR DR

City State Zip Code  
CLACKAMAS OR 97015

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

Name of Employer Occupation  
Pacific Maritime Association Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
205.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
10 / 13 / 2015

**Transaction ID : SA11AI.97450**

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 25.00

**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 60 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DONALD A. MEHNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16600 SE BEL AIR DR  
 City CLACKAMAS State OR Zip Code 97015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97452**  
 Amount of Each Receipt this Period  
 5.00

**B. DONALD A. MEHNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16600 SE BEL AIR DR  
 City CLACKAMAS State OR Zip Code 97015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015  
**Transaction ID : SA11AI.97454**  
 Amount of Each Receipt this Period  
 5.00

**C. JACK MENDEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1210 SUNSIDE ST  
 City SAN PEDRO State CA Zip Code 90732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 205.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2015  
**Transaction ID : SA11AI.97717**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JACK MENDEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO State CA Zip Code 90732

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 22 / 2015**

**Transaction ID : SA11AI.97727**

Amount of Each Receipt this Period **5.00**

**B. JACK MENDEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO State CA Zip Code 90732

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt **10 / 29 / 2015**

**Transaction ID : SA11AI.97736**

Amount of Each Receipt this Period **5.00**

**C. PHILIP MLADINICH**  
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 7754

City LAGUNA NIGUEL State CA Zip Code 92607

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **205.00**

Date of Receipt **10 / 29 / 2015**

**Transaction ID : SA11AI.97529**

Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **15.00**

**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 62 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. WENDY MONROY STAVROS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VIA NOVA  
 City LOMITA State CA Zip Code 90717-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **205.00**

Date of Receipt **10 / 29 / 2015**  
**Transaction ID : SA11AI.97561**  
 Amount of Each Receipt this Period **5.00**

**B. ROBERT NEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5309 PEARCE AVE  
 City LAKEWOOD State CA Zip Code 90712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **390.00**

Date of Receipt **10 / 01 / 2015**  
**Transaction ID : SA11AI.97536**  
 Amount of Each Receipt this Period **10.00**

**C. ROBERT NEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5309 PEARCE AVE  
 City LAKEWOOD State CA Zip Code 90712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 08 / 2015**  
**Transaction ID : SA11AI.97537**  
 Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **25.00**  
**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 63 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 5309 PEARCE AVE

City LAKEWOOD State CA Zip Code 90712

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97539**

Amount of Each Receipt this Period

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

Mailing Address 5309 PEARCE AVE

City LAKEWOOD State CA Zip Code 90712

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97541**

Amount of Each Receipt this Period

**C. ROBERT NEWELL**  
Full Name (Last, First, Middle Initial)

Mailing Address 5309 PEARCE AVE

City LAKEWOOD State CA Zip Code 90712

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  
 /  /   
**Transaction ID : SA11AI.97543**

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 64 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Arne Nielsen</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		20		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		20		2015									
Mailing Address 6208 - 4th St NE			<b>Transaction ID : SA11AI.97782</b>										
City TACOMA	State WA	Zip Code 98422	Amount of Each Receipt this Period <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00									
60.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Pacific Maritime Association	Occupation Longshore Worker												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2520.00</td> </tr> </table>	2520.00											
2520.00													

Full Name (Last, First, Middle Initial) <b>B. Arne Nielsen</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		20		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		20		2015									
Mailing Address 6208 - 4th St NE			<b>Transaction ID : SA11AI.97791</b>										
City TACOMA	State WA	Zip Code 98422	Amount of Each Receipt this Period <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00									
60.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Pacific Maritime Association	Occupation Longshore Worker												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2580.00</td> </tr> </table>	2580.00											
2580.00													

Full Name (Last, First, Middle Initial) <b>C. Arne Nielsen</b>			Date of Receipt <table border="1"> <tr> <td>M M M</td> <td>/</td> <td>D D D</td> <td>/</td> <td>Y Y Y Y Y Y</td> </tr> <tr> <td>10</td> <td></td> <td>20</td> <td></td> <td>2015</td> </tr> </table>	M M M	/	D D D	/	Y Y Y Y Y Y	10		20		2015
M M M	/	D D D	/	Y Y Y Y Y Y									
10		20		2015									
Mailing Address 6208 - 4th St NE			<b>Transaction ID : SA11AI.97802</b>										
City TACOMA	State WA	Zip Code 98422	Amount of Each Receipt this Period <table border="1"> <tr> <td>60.00</td> </tr> </table>	60.00									
60.00													
FEC ID number of contributing federal political committee. C													
Name of Employer Pacific Maritime Association	Occupation Longshore Worker												
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <table border="1"> <tr> <td>2640.00</td> </tr> </table>	2640.00											
2640.00													

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180.00		
<b>TOTAL</b> This Period (last page this line number only).....▶	<table border="1"> <tr> <td></td> </tr> </table>	



**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 65 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **370.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	01	/	2015

**Transaction ID : SA11AI.97564**

Amount of Each Receipt this Period  

10.00
-------

**B. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	08	/	2015

**Transaction ID : SA11AI.97570**

Amount of Each Receipt this Period  

10.00
-------

**C. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97576**

Amount of Each Receipt this Period  

10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE  
City LONG BEACH State CA Zip Code 90804  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Foreman  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **400.00**

Date of Receipt **10 / 22 / 2015**  
**Transaction ID : SA11AI.97582**  
Amount of Each Receipt this Period **10.00**

**B. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE  
City LONG BEACH State CA Zip Code 90804  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Pacific Maritime Association Occupation Foreman  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **410.00**

Date of Receipt **10 / 29 / 2015**  
**Transaction ID : SA11AI.97588**  
Amount of Each Receipt this Period **10.00**

**C. Eadie Omonaka**  
Full Name (Last, First, Middle Initial)  
Mailing Address 2115 Haena Drive  
City HONOLULU State HI Zip Code 96822  
FEC ID number of contributing federal political committee. **C**  
Name of Employer ILWU 142 Occupation Local Rep  
Receipt For:  Primary  General  Other (specify)  Aggregate Year-to-Date **600.00**

Date of Receipt **10 / 20 / 2015**  
**Transaction ID : SA11AI.97504**  
Amount of Each Receipt this Period **60.00**

**SUBTOTAL** of Receipts This Page (optional)..... **80.00**  
**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 67 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARK S OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2819

City OLYMPIA State WA Zip Code 98501

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97619**

Amount of Each Receipt this Period  
**10.00**

**B. MARK S OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2819

City OLYMPIA State WA Zip Code 98501

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97620**

Amount of Each Receipt this Period  
**10.00**

**C. MARK S OWENS**  
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 2819

City OLYMPIA State WA Zip Code 98501

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97621**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**

**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 68 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City TACOMA	State WA	Zip Code 98408	<b>Transaction ID : SA11AI.97781</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="820.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City TACOMA	State WA	Zip Code 98408	<b>Transaction ID : SA11AI.97790</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="840.00"/>		

Full Name (Last, First, Middle Initial) <b>C. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City TACOMA	State WA	Zip Code 98408	<b>Transaction ID : SA11AI.97801</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="20.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="860.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
<b>TOTAL</b> 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 69 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. SHANE PEDERSON</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 06 / 2015 <b>Transaction ID : SA11AI.97626</b>		
Mailing Address 18222 S Arnett Drive			Amount of Each Receipt this Period 10.00		
City OREGON CITY	State OR	Zip Code 97045			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 380.00			

Full Name (Last, First, Middle Initial) <b>B. SHANE PEDERSON</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 13 / 2015 <b>Transaction ID : SA11AI.97627</b>		
Mailing Address 18222 S Arnett Drive			Amount of Each Receipt this Period 10.00		
City OREGON CITY	State OR	Zip Code 97045			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 390.00			

Full Name (Last, First, Middle Initial) <b>C. SHANE PEDERSON</b>			Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97628</b>		
Mailing Address 18222 S Arnett Drive			Amount of Each Receipt this Period 10.00		
City OREGON CITY	State OR	Zip Code 97045			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="10"/> / <input type="text" value="06"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97639</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="400.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="10"/> / <input type="text" value="13"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97646</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="410.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97653</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="420.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 71 OF 90
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID PORTER</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 27 / 2015 <b>Transaction ID : SA11AI.97660</b>
Mailing Address 4123 NE Rodney		Amount of Each Receipt this Period 60.00
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 430.00
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Claro P Romero Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97827</b>
Mailing Address PO Box 2552		Amount of Each Receipt this Period 25.00
City WAILUKU	State HI	Zip Code 96793-7552
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 475.00
Name of Employer ILWU 142	Occupation Div Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Claro P Romero Jr</b>		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97828</b>
Mailing Address PO Box 2552		Amount of Each Receipt this Period 25.00
City WAILUKU	State HI	Zip Code 96793-7552
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date 500.00
Name of Employer ILWU 142	Occupation Div Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DAVID A SERRATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 01 / 2015**

**Transaction ID : SA11AI.97803**

Amount of Each Receipt this Period  
**10.00**

**B. DAVID A SERRATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 08 / 2015**

**Transaction ID : SA11AI.97804**

Amount of Each Receipt this Period  
**10.00**

**C. DAVID A SERRATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 15 / 2015**

**Transaction ID : SA11AI.97805**

Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DAVID A SERRATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2015  
**Transaction ID : SA11AI.97806**

Amount of Each Receipt this Period  
**10.00**

**B. DAVID A SERRATO**  
Full Name (Last, First, Middle Initial)

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 29 / 2015  
**Transaction ID : SA11AI.97807**

Amount of Each Receipt this Period  
**10.00**

**C. Rae C Shiraki**  
Full Name (Last, First, Middle Initial)

Mailing Address 3510 Lelehune Place

City HONOLULU State HI Zip Code 96822

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

Name of Employer ILWU 142 Occupation Div Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.50**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015  
**Transaction ID : SA11AI.97505**

Amount of Each Receipt this Period  
**12.50**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **32.50**

**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 74 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Rae C Shiraki**  
Full Name (Last, First, Middle Initial)

Mailing Address 3510 Lelehune Place

City HONOLULU State HI Zip Code 96822

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

Name of Employer ILWU 142 Occupation Div Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97506**

Amount of Each Receipt this Period  
 12.50

**B. CECIL F SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1101 SE 116th Ct

City VANCOUVER State WA Zip Code 98683

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 06 / 2015

**Transaction ID : SA11AI.97818**

Amount of Each Receipt this Period  
 5.00

**C. CECIL F SMITH**  
Full Name (Last, First, Middle Initial)

Mailing Address 1101 SE 116th Ct

City VANCOUVER State WA Zip Code 98683

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 255.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 13 / 2015

**Transaction ID : SA11AI.97820**

Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 22.50

**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 75 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. CECIL F SMITH</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97822</b>
Mailing Address 1101 SE 116th Ct			Amount of Each Receipt this Period 5.00
City VANCOUVER	State WA	Zip Code 98683	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00		

Full Name (Last, First, Middle Initial) <b>B. CECIL F SMITH</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 27 / 2015 <b>Transaction ID : SA11AI.97824</b>
Mailing Address 1101 SE 116th Ct			Amount of Each Receipt this Period 5.00
City VANCOUVER	State WA	Zip Code 98683	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 265.00		

Full Name (Last, First, Middle Initial) <b>C. Eric Smith</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97664</b>
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00
City Tacoma	State WA	Zip Code 98401	
FEC ID number of contributing federal political committee. C			
Name of Employer PMA	Occupation longshore		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Eric Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 701

City Tacoma State WA Zip Code 98401

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

Name of Employer PMA Occupation longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97668**

Amount of Each Receipt this Period  
 25.00

**B. Eric Smith**  
Full Name (Last, First, Middle Initial)

Mailing Address PO Box 701

City Tacoma State WA Zip Code 98401

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

Name of Employer PMA Occupation longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97672**

Amount of Each Receipt this Period  
 25.00

**C. Richard Snell**  
Full Name (Last, First, Middle Initial)

Mailing Address 1709 97th Avenue Ct E

City PUYALLUP State WA Zip Code 98371

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97663**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00

**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 77 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Richard Snell</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97667</b>
Mailing Address 1709 97th Avenue Ct E		Amount of Each Receipt this Period 10.00
City PUYALLUP	State WA	Zip Code 98371
FEC ID number of contributing federal political committee. C		
Name of Employer PMA	Occupation Longshore worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

Full Name (Last, First, Middle Initial) <b>B. Richard Snell</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97671</b>
Mailing Address 1709 97th Avenue Ct E		Amount of Each Receipt this Period 10.00
City PUYALLUP	State WA	Zip Code 98371
FEC ID number of contributing federal political committee. C		
Name of Employer PMA	Occupation Longshore worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 430.00	

Full Name (Last, First, Middle Initial) <b>C. David L Taylor</b>		Date of Receipt M M / D D / Y Y Y Y Y 10 / 20 / 2015 <b>Transaction ID : SA11AI.97593</b>
Mailing Address 3321 Whiteman Rd Kps		Amount of Each Receipt this Period 1000.00
City LONGBRANCH	State WA	Zip Code 98351
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	1020.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MICHELLE VAN PATTEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 01 / 2015  
**Transaction ID : SA11AI.97679**

Amount of Each Receipt this Period 10.00

**B. MICHELLE VAN PATTEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 410.00

Date of Receipt 10 / 08 / 2015  
**Transaction ID : SA11AI.97681**

Amount of Each Receipt this Period 10.00

**C. MICHELLE VAN PATTEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt 10 / 15 / 2015  
**Transaction ID : SA11AI.97683**

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 79 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MICHELLE VAN PATTEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt 10 / 22 / 2015  
**Transaction ID : SA11AI.97685**

Amount of Each Receipt this Period 10.00

**B. MICHELLE VAN PATTEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt 10 / 29 / 2015  
**Transaction ID : SA11AI.97687**

Amount of Each Receipt this Period 10.00

**C. JOAN VAN SPREW**  
Full Name (Last, First, Middle Initial)

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt 10 / 01 / 2015  
**Transaction ID : SA11AI.97702**

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 80 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JOAN VAN SPREW**  
Full Name (Last, First, Middle Initial)

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 08 / 2015

**Transaction ID : SA11AI.97712**

Amount of Each Receipt this Period  
 10.00

**B. JOAN VAN SPREW**  
Full Name (Last, First, Middle Initial)

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 15 / 2015

**Transaction ID : SA11AI.97722**

Amount of Each Receipt this Period  
 10.00

**C. JOAN VAN SPREW**  
Full Name (Last, First, Middle Initial)

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 22 / 2015

**Transaction ID : SA11AI.97732**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 81 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JOAN VAN SPREW**  
Full Name (Last, First, Middle Initial)

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt **10 / 29 / 2015**

**Transaction ID : SA11AI.97741**

Amount of Each Receipt this Period **10.00**

**B. MAX VEKICH Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 2830 SW RAYMOND ST UNIT 201

City SEATTLE State WA Zip Code 98126

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

Name of Employer Pacific Maritime Association Occupation Marine Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt **10 / 01 / 2015**

**Transaction ID : SA11AI.97750**

Amount of Each Receipt this Period **10.00**

**C. MAX VEKICH Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 2830 SW RAYMOND ST UNIT 201

City SEATTLE State WA Zip Code 98126

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

Name of Employer Pacific Maritime Association Occupation Marine Clerk

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt **10 / 08 / 2015**

**Transaction ID : SA11AI.97752**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**

**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 82 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MAX VEKICH Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 2830 SW RAYMOND ST UNIT 201

City SEATTLE	State WA	Zip Code 98126
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Maritime Association	Occupation Marine Clerk
--	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

**Transaction ID : SA11AI.97754**

Amount of Each Receipt this Period  

10.00
-------

**B. MAX VEKICH Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 2830 SW RAYMOND ST UNIT 201

City SEATTLE	State WA	Zip Code 98126
-----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Marine Clerk
--	----------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
370.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	22	/	2015

**Transaction ID : SA11AI.97756**

Amount of Each Receipt this Period  

10.00
-------

**C. WALTER J WALLS**  
Full Name (Last, First, Middle Initial)

Mailing Address 1101 BROWN Pt BL

City TACOMA	State WA	Zip Code 98422
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
410.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	20	/	2015

**Transaction ID : SA11AI.97798**

Amount of Each Receipt this Period  

10.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 83 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM A WATKINS</b>			Date of Receipt
Mailing Address 7805 - 99th Av SW			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97532</b>
LAKEWOOD	WA	98498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="820.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. WILLIAM A WATKINS</b>			Date of Receipt
Mailing Address 7805 - 99th Av SW			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97533</b>
LAKEWOOD	WA	98498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="840.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. WILLIAM A WATKINS</b>			Date of Receipt
Mailing Address 7805 - 99th Av SW			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97534</b>
LAKEWOOD	WA	98498	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="860.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
<b>TOTAL</b> 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 84 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. SCOTT A WELFRINGER</b>			Date of Receipt
Mailing Address 1920 - 414th St E			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City EATONVILLE	State CA	Zip Code 98328	<b>Transaction ID : SA11AI.97458</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer PMA	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="400.00"/>		

Full Name (Last, First, Middle Initial) <b>B. SCOTT A WELFRINGER</b>			Date of Receipt
Mailing Address 1920 - 414th St E			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City EATONVILLE	State CA	Zip Code 98328	<b>Transaction ID : SA11AI.97459</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer PMA	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="410.00"/>		

Full Name (Last, First, Middle Initial) <b>C. SCOTT A WELFRINGER</b>			Date of Receipt
Mailing Address 1920 - 414th St E			<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2015"/>
City EATONVILLE	State CA	Zip Code 98328	<b>Transaction ID : SA11AI.97460</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer PMA	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="420.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 85 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. Mathew Yamamoto**

Mailing Address 451 Atkinson Drive

City HONOLULU State HI Zip Code 96814-4729

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

Name of Employer ILWU 142 Occupation Int'l Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97498**

Amount of Each Receipt this Period  
**40.00**

Full Name (Last, First, Middle Initial)  
**B. GERARDO L YANEZ**

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 06 / 2015**

**Transaction ID : SA11AI.97842**

Amount of Each Receipt this Period  
**10.00**

Full Name (Last, First, Middle Initial)  
**C. GERARDO L YANEZ**

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **270.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**10 / 14 / 2015**

**Transaction ID : SA11AI.97843**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **60.00**

**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 86 OF 90
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GERARDO L YANEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97844**

Amount of Each Receipt this Period  
 10.00

**B. GERARDO L YANEZ**  
Full Name (Last, First, Middle Initial)

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 27 / 2015

**Transaction ID : SA11AI.97845**

Amount of Each Receipt this Period  
 10.00

**C. Gordon Y.S Young**  
Full Name (Last, First, Middle Initial)

Mailing Address Box 1454

City AIEA State HI Zip Code 96701

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 475.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 10 / 20 / 2015

**Transaction ID : SA11AI.97434**

Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	45.00
<b>TOTAL</b> This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 87 OF 90  
(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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A.** Full Name (Last, First, Middle Initial)  
**Gordon Y.S Young**

Mailing Address Box 1454

City State Zip Code  
AIEA HI 96701

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

Name of Employer Occupation  
Pacific Maritime Association Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
**500.00**

Date of Receipt  
M M / D D / Y Y Y Y  
**10 / 20 / 2015**

**Transaction ID : SA11AI.97435**

Amount of Each Receipt this Period  
**25.00**

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

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

**C.** Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  
M M / D D / Y Y Y Y

Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>25.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>5539.11</b>

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

**A. KAREN BASS FOR CONGRESS**

Mailing Address 777 S. FIGUEROA STREET  
SUITE 4050

City LOS ANGELES State CA Zip Code 90017

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**KAREN BASS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 37

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2015			

**Transaction ID : SB23.97418**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**B. LOBIONDO FOR CONGRESS**

Mailing Address PO BOX 775

City MARMORA State NJ Zip Code 08223

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**FRANK A, LOBIONDO**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: NJ District: 02

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			22			2015			

**Transaction ID : SB23.97417**

Amount of Each Disbursement this Period

1500.00
---------

Full Name (Last, First, Middle Initial)

**C. MCNERNEY FOR CONGRESS**

Mailing Address 5429 Madison Avenue

City Sacramento State CA Zip Code 95841

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**JERRY MCNERNEY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 11

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			28			2015			

**Transaction ID : SB23.97419**

Amount of Each Disbursement this Period

1500.00
---------

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

4500.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

**A. TONY CARDENAS FOR CONGRESS**

Mailing Address 249 E. OCEAN BLVD. SUITE 685

City LONG BEACH State CA Zip Code 90802

Purpose of Disbursement  
Contribution in support of candidate

011

Category/  
Type

Candidate Name

**TONY CARDENAS**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: CA District: 29

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
10 / 20 / 2015

**Transaction ID : SB23.97430**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

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

Amount of Each Disbursement this Period

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

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

1500.00

6000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 90 OF 90

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

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NAME OF COMMITTEE (In Full)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

### A. Citizens for Joe Verdoes

Mailing Address PO Box 1503

City Anacortes State WA Zip Code 98221

Purpose of Disbursement  
Contribution in support of candidate

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For: 2015  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	15	/	2015

Transaction ID : SB29.97423

Amount of Each Disbursement this Period

250.00
--------

### B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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### C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

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

250.00
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250.00
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