

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

Check if different than previously reported. (ACC)

San Francisco CA 94109

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00176214

3. IS THIS REPORT NEW OR AMENDED (N) (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

(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), Dec 20 (M12), Jan 31 (YE)

- 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)

(c) 12-Day PRE-Election Report for the: Primary (12P), General (12G), Runoff (12R), Convention (12C), Special (12S)

Election on M M / D D / Y Y Y Y Y Y in the State of

(d) 30-Day POST-Election Report for the: General (30G), Runoff (30R), Special (30S)

Election on M M / D D / Y Y Y Y Y Y in the State of

5. Covering Period 06 01 2014 through 06 30 2014

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 09 04 2014

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

Office Use Only

FEC FORM 3X Rev. 12/2004

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

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="2014"/>		<input type="text" value="127586.29"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="118876.96"/>	
(c) Total Receipts (from Line 19) .....	<input type="text" value="22660.41"/>	<input type="text" value="51236.90"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="141537.37"/>	<input type="text" value="178823.19"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="30850.00"/>	<input type="text" value="68135.82"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="110687.37"/>	<input type="text" value="110687.37"/>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<input type="text" value="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).....	13736.54	23148.82
(ii) Unitemized .....	8921.87	28071.08
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	22658.41	51219.90
(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) .....	22658.41	51219.90
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).....	2.00	17.00
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))..... ▶	22660.41	51236.90
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	22660.41	51236.90

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	0.00	285.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0.00	285.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	30750.00	66750.00
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 .....	100.00	100.00
(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)).....	100.00	100.00
29. Other Disbursements .....	0.00	1000.00
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)) ..	30850.00	68135.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	30850.00	68135.82

**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) .....	22658.41	51219.90
34. Total Contribution Refunds (from Line 28(d)) .....	100.00	100.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	22558.41	51119.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0.00	285.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	2.00	17.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	-2.00	268.82

**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 58
	<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. RUDY ALBA Sr</b>		Date of Receipt
Mailing Address 1400 S TROTWOOD Ave		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN PEDRO	CA	90732
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11Al.86521</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
PMA	Lpngshoreman	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="375.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. RUDY ALBA Sr</b>		Date of Receipt
Mailing Address 1400 S TROTWOOD Ave		<input type="text" value="06"/> / <input type="text" value="19"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN PEDRO	CA	90732
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11Al.86542</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
PMA	Lpngshoreman	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="400.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. RUDY ALBA Sr</b>		Date of Receipt
Mailing Address 1400 S TROTWOOD Ave		<input type="text" value="06"/> / <input type="text" value="26"/> / <input type="text" value="2014"/>
City	State	Zip Code
SAN PEDRO	CA	90732
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11Al.86553</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
PMA	Lpngshoreman	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="425.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="75.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 58
	<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. JESS ARMENTA**  
Full Name (Last, First, Middle Initial)

Mailing Address 12130 VAN BUREN BLVD  
PMB 305

City RIVERSIDE State CA Zip Code 92504

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 ▼ 220.00

Date of Receipt  
06 / 05 / 2014  
**Transaction ID : SA11AI.86507**

Amount of Each Receipt this Period  
10.00

**B. JESS ARMENTA**  
Full Name (Last, First, Middle Initial)

Mailing Address 12130 VAN BUREN BLVD  
PMB 305

City RIVERSIDE State CA Zip Code 92504

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 ▼ 230.00

Date of Receipt  
06 / 12 / 2014  
**Transaction ID : SA11AI.86508**

Amount of Each Receipt this Period  
10.00

**C. JESS ARMENTA**  
Full Name (Last, First, Middle Initial)

Mailing Address 12130 VAN BUREN BLVD  
PMB 305

City RIVERSIDE State CA Zip Code 92504

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 ▼ 240.00

Date of Receipt  
06 / 19 / 2014  
**Transaction ID : SA11AI.86509**

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: PAGE 8 OF 58  
(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. JESS ARMENTA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12130 VAN BUREN BLVD  
 PMB 305  
 City RIVERSIDE State CA Zip Code 92504  
 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 / D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86510**  
 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 ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86342**  
 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 ▼ 240.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86349**  
 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 9 OF 58
	<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**

Full Name (Last, First, Middle Initial) <b>A. MARIO ARTEAGA</b>		Date of Receipt MM / DD / YYYY 06 / 19 / 2014 <b>Transaction ID : SA11AI.86356</b>
Mailing Address 2549 EAST 220TH ST		Amount of Each Receipt this Period 10.00
City LONG BEACH	State CA	
Zip Code 90810		Aggregate Year-to-Date ▼ 250.00
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) ▼

Full Name (Last, First, Middle Initial) <b>B. MARIO ARTEAGA</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11AI.86363</b>
Mailing Address 2549 EAST 220TH ST		Amount of Each Receipt this Period 10.00
City LONG BEACH	State CA	
Zip Code 90810		Aggregate Year-to-Date ▼ 260.00
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) ▼

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86588</b>
Mailing Address 8045 MONACO # 62		Amount of Each Receipt this Period 20.00
City STANTON	State CA	
Zip Code 90680		Aggregate Year-to-Date ▼ 440.00
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) ▼

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<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 10 OF 58  
(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. 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 ▼ 460.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86589**  
 Amount of Each Receipt this Period  
 20.00

**B. 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 ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.86590**  
 Amount of Each Receipt this Period  
 20.00

**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 ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86591**  
 Amount of Each Receipt this Period  
 20.00

**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 11 OF 58
	<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. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2014  
**Transaction ID : SA11AI.86584**  
 Amount of Each Receipt this Period 25.00

**B. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt 06 / 05 / 2014  
**Transaction ID : SA11AI.86585**  
 Amount of Each Receipt this Period 25.00

**C. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.86586**  
 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 12 OF 58
	<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. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 575.00

Date of Receipt 06 / 23 / 2014  
**Transaction ID : SA11AI.86587**  
 Amount of Each Receipt this Period 25.00

**B. JOHN M. BARRETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 37980 S ELBOW BEND DR  
 City TUCSON State AZ Zip Code 85739  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 18 / 2014  
**Transaction ID : SA11AI.86638**  
 Amount of Each Receipt this Period 500.00

**C. RICHARD J. BARSCH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 9400 SW MORRISON ST  
 City PORTLAND State OR Zip Code 97225  
 Name of Employer Pacific Maritime Association Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 500.00

Date of Receipt 06 / 05 / 2014  
**Transaction ID : SA11AI.86438**  
 Amount of Each Receipt this Period 500.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1025.00  
**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 13 OF 58
	<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 Birrer**  
Full Name (Last, First, Middle Initial)

Mailing Address 816 NE Pinebrook Av

City VANCOUVER State WA Zip Code 98684

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 06 / 18 / 2014  
**Transaction ID : SA11AI.86650**

Amount of Each Receipt this Period 500.00

**B. David J Brennan Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 1300 University St #9-A

City SEATTLE State WA Zip Code 98101

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 ▼ 1000.00

Date of Receipt 06 / 05 / 2014  
**Transaction ID : SA11AI.86570**

Amount of Each Receipt this Period 1000.00

**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 ▼ 241.50

Date of Receipt 06 / 05 / 2014  
**Transaction ID : SA11AI.86243**

Amount of Each Receipt this Period 10.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 1510.50

**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 14 OF 58
	<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 ▼ 252.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86245**  
 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 ▼ 262.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.86249**  
 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 ▼ 273.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86253**  
 Amount of Each Receipt this Period  
 10.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	31.50
<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 58
	<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. 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 ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86525**

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 ▼ **240.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86535**

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 ▼ **250.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.86546**

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 16 OF 58
	<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. 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 ▼ **260.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86557**

Amount of Each Receipt this Period  
**10.00**

**B. 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 ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86641**

Amount of Each Receipt this Period  
**10.00**

**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 ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86642**

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 17 OF 58
	<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. 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 ▼ 230.00

Date of Receipt  
06 / 23 / 2014  
**Transaction ID : SA11AI.86643**

Amount of Each Receipt this Period  
10.00

**B. 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 ▼ 240.00

Date of Receipt  
06 / 23 / 2014  
**Transaction ID : SA11AI.86644**

Amount of Each Receipt this Period  
10.00

**C. Chris Connaway**  
Full Name (Last, First, Middle Initial)

Mailing Address 637 14th St

City ASTORIA State OR Zip Code 97103

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  
06 / 05 / 2014  
**Transaction ID : SA11AI.86179**

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**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 58
	<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 DELK**  
Full Name (Last, First, Middle Initial)  
Mailing Address 36 SE 93RD AV

City PORTLAND	State OR	Zip Code 97216
------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

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
06	/	18	/	2014

**Transaction ID : SA11AI.86455**

Amount of Each Receipt this Period  
500.00

**B. Charles P Dobbins**  
Full Name (Last, First, Middle Initial)  
Mailing Address 28010 NE 10th Ave

City RIDGEFIELD	State WA	Zip Code 98642
--------------------	-------------	-------------------

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

Name of Employer Retired	Occupation Retired
-----------------------------	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	18	/	2014

**Transaction ID : SA11AI.86505**

Amount of Each Receipt this Period  
240.00

**C. 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 ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86291**

Amount of Each Receipt this Period  
25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	765.00
<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 19 OF 58
<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. DAVID G ELLIOTT</b>		Date of Receipt
Mailing Address 52042 SE Icenogle Loop		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code SCAPPOOSE OR 97056		<b>Transaction ID : SA11AI.86563</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 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="230.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DAVID G ELLIOTT</b>		Date of Receipt
Mailing Address 52042 SE Icenogle Loop		<input type="text" value="06"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City State Zip Code SCAPPOOSE OR 97056		<b>Transaction ID : SA11AI.86569</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 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="240.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DAVID G ELLIOTT</b>		Date of Receipt
Mailing Address 52042 SE Icenogle Loop		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City State Zip Code SCAPPOOSE OR 97056		<b>Transaction ID : SA11AI.86565</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 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="250.00"/>	

<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 20 OF 58
	<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 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 ▼ 260.00

Date of Receipt  
06 / 24 / 2014  
**Transaction ID : SA11AI.86567**

Amount of Each Receipt this Period  
100.00

**B. HAROLD C. ERICSSON**  
Full Name (Last, First, Middle Initial)

Mailing Address 26220 GOVERNOR AVENUE

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 ▼ 500.00

Date of Receipt  
06 / 03 / 2014  
**Transaction ID : SA11AI.86242**

Amount of Each Receipt this Period  
500.00

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

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 ▼ 1800.00

Date of Receipt  
06 / 18 / 2014  
**Transaction ID : SA11AI.86207**

Amount of Each Receipt this Period  
1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1510.00

**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 21 OF 58
	<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. 1 Guy Fujimura</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86172</b>
Mailing Address PO BOX 13094		Amount of Each Receipt this Period 25.00
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 ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>B. Wesley M Furtado</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86273</b>
Mailing Address 1127 Liku St		Amount of Each Receipt this Period 100.00
City KAILUA	State HI	Zip Code 96734-3862
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU	Occupation Vice President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. Robert Gauthier</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86180</b>
Mailing Address 375 South St		Amount of Each Receipt this Period 500.00
City ASTORIA	State OR	Zip Code 97103
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 ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	625.00
<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 22 OF 58
	<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. KELSEY E GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 MIRA MAR AVE APT 2

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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 ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86345**

Amount of Each Receipt this Period  

10.00
-------

**B. KELSEY E GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 MIRA MAR AVE APT 2

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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 ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.86352**

Amount of Each Receipt this Period  

10.00
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**C. KELSEY E GREEN**  
Full Name (Last, First, Middle Initial)

Mailing Address 123 MIRA MAR AVE APT 2

City LONG BEACH	State CA	Zip Code 90803
--------------------	-------------	-------------------

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
06	/	19	/	2014

**Transaction ID : SA11AI.86359**

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 23 OF 58
	<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. KELSEY E GREEN</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11AI.86366</b>
Mailing Address 123 MIRA MAR AVE APT 2		Amount of Each Receipt this Period 10.00
City LONG BEACH	State CA	Zip Code 90803
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. James A Griggs</b>		Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : SA11AI.86414</b>
Mailing Address 6205 54th Ave NW		Amount of Each Receipt this Period 500.00
City OLYMPIA	State WA	Zip Code 98502
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 ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MARK A GUERRERO</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86692</b>
Mailing Address 1248 LAKME AVE		Amount of Each Receipt this Period 10.00
City WILMINGTON	State CA	Zip Code 90744
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 ▼ 230.00	

<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 24 OF 58
	<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 A GUERRERO**  
Full Name (Last, First, Middle Initial)

Mailing Address 1248 LAKME AVE

City WILMINGTON State CA Zip Code 90744

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 ▼ 240.00

Date of Receipt 06 / 12 / 2014  
**Transaction ID : SA11AI.86693**

Amount of Each Receipt this Period 10.00

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

Mailing Address 1248 LAKME AVE

City WILMINGTON State CA Zip Code 90744

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 06 / 19 / 2014  
**Transaction ID : SA11AI.86694**

Amount of Each Receipt this Period 10.00

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

Mailing Address 1248 LAKME AVE

City WILMINGTON State CA Zip Code 90744

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 ▼ 260.00

Date of Receipt 06 / 26 / 2014  
**Transaction ID : SA11AI.86695**

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 25 OF 58
	<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. Ronald Hakanson</b>			Date of Receipt
Mailing Address 3715 N 11TH ST			<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City TACOMA	State WA	Zip Code 98406	<b>Transaction ID : SA11AI.86599</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="12.50"/>
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="250.00"/>		

Full Name (Last, First, Middle Initial) <b>B. Ronald Hakanson</b>			Date of Receipt
Mailing Address 3715 N 11TH ST			<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City TACOMA	State WA	Zip Code 98406	<b>Transaction ID : SA11AI.86608</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="12.50"/>
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="262.50"/>		

Full Name (Last, First, Middle Initial) <b>C. Ronald Hakanson</b>			Date of Receipt
Mailing Address 3715 N 11TH ST			<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City TACOMA	State WA	Zip Code 98406	<b>Transaction ID : SA11AI.86615</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="12.50"/>
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="275.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="37.50"/>
<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 26 OF 58
	<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. Ronald Hakanson</b>			Date of Receipt
Mailing Address 3715 N 11TH ST			<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86624</b>
TACOMA	WA	98406	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="12.50"/>
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="287.50"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gary Harner</b>			Date of Receipt
Mailing Address 429 East Kennaston Ave			<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86387</b>
MONTESANO	WA	98563	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="300.00"/>
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="300.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Anna Herrera</b>			Date of Receipt
Mailing Address 4527 Linden			<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86340</b>
LONG BEACH	CA	90807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<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="230.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="322.50"/>
<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 27 OF 58
	<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 MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : SA11AI.86347</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		Aggregate Year-to-Date ▼ 240.00	
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. Anna Herrera</b>			Date of Receipt MM / DD / YYYY 06 / 19 / 2014 <b>Transaction ID : SA11AI.86354</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		Aggregate Year-to-Date ▼ 250.00	
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. Anna Herrera</b>			Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11AI.86361</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		Aggregate Year-to-Date ▼ 260.00	
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).....▶	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 28 OF 58  
(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 Larry Huntsucker**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 39  
 City State Zip Code  
 POWERS WA 97466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Retired Retired  
 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  
 06 / 18 / 2014  
**Transaction ID : SA11AI.86487**  
 Amount of Each Receipt this Period  
 250.00

**B. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City State Zip Code  
 ORANGE LAKE FL 32681  
 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 ▼  
 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 03 / 2014  
**Transaction ID : SA11AI.86416**  
 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 State Zip Code  
 ORANGE LAKE FL 32681  
 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 ▼  
 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 10 / 2014  
**Transaction ID : SA11AI.86419**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 270.00  
**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 58
	<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. WALTER A INGERSOLL</b>		Date of Receipt
Mailing Address PO BOX 370 LOT U		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City ORANGE LAKE	State FL	Zip Code 32681
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86417</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="250.00"/>	

Full Name (Last, First, Middle Initial) <b>B. WALTER A INGERSOLL</b>		Date of Receipt
Mailing Address PO BOX 370 LOT U		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City ORANGE LAKE	State FL	Zip Code 32681
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86418</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="260.00"/>	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL JOHNSON</b>		Date of Receipt
Mailing Address 954 W 20TH ST		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City SAN PEDRO	State CA	Zip Code 90731
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86656</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="500.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="600.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="520.00"/>
<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 30 OF 58
	<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. Joanne Kealoha</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86268</b>
Mailing Address 1023 Kapahulu Ave #18		Amount of Each Receipt this Period 60.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 360.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID KING</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86597</b>
Mailing Address 3563 E J St		Amount of Each Receipt this Period 10.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) <b>C. DAVID KING</b>		Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86606</b>
Mailing Address 3563 E J St		Amount of Each Receipt this Period 10.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<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 58
	<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
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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 ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86613**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 3563 E J St

City TACOMA	State WA	Zip Code 98404
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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 ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86622**

Amount of Each Receipt this Period  
10.00

**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 ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86412**

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 32 OF 58
	<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**

**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 ▼ **220.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86413**

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 ▼ **230.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86415**

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 ▼ **321.54**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86307**

Amount of Each Receipt this Period  

6.54
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>26.54</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 58
	<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**

**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 ▼ **336.54**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.86309**

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 ▼ **351.54**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2014

**Transaction ID : SA11AI.86311**

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 ▼ **366.54**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : SA11AI.86313**

Amount of Each Receipt this Period  

15.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>45.00</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 34 OF 58
	<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 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 ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86523**

Amount of Each Receipt this Period  
10.00

**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 ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	12	/	2014

**Transaction ID : SA11AI.86533**

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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2014

**Transaction ID : SA11AI.86544**

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 35 OF 58
	<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. MARK LOPEZ</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11AI.86555</b>
Mailing Address 1473 W SEPULVEDA ST		Amount of Each Receipt this Period 10.00
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: <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. ANTHONY LUERA</b>		Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11AI.86550</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		
Name of Employer Pacific Maritime Association	Occupation Foreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00	

Full Name (Last, First, Middle Initial) <b>C. Dean C Lusk</b>		Date of Receipt MM / DD / YYYY 06 / 18 / 2014 <b>Transaction ID : SA11AI.86221</b>
Mailing Address 2074 E LOS LAGOS Dr		Amount of Each Receipt this Period 500.00
City FORT MOHAVE	State AZ	Zip Code 86426
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Foreman	
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).....▶	518.00
<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 36 OF 58
	<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. Jeff McCarthy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 30213 - 92nd Av E

City GRAHAM	State WA	Zip Code 98338
----------------	-------------	-------------------

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	/	D D	/	Y Y Y Y
06		05		2014

**Transaction ID : SA11AI.86227**

Amount of Each Receipt this Period  

10.00
-------

**B. Jeff McCarthy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 30213 - 92nd Av E

City GRAHAM	State WA	Zip Code 98338
----------------	-------------	-------------------

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 ▼ **220.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		05		2014

**Transaction ID : SA11AI.86228**

Amount of Each Receipt this Period  

10.00
-------

**C. Jeff McCarthy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 30213 - 92nd Av E

City GRAHAM	State WA	Zip Code 98338
----------------	-------------	-------------------

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 ▼ **230.00**

Date of Receipt  

M M	/	D D	/	Y Y Y Y
06		23		2014

**Transaction ID : SA11AI.86229**

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 37 OF 58
	<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. Jeff McCarthy**  
Full Name (Last, First, Middle Initial)  
Mailing Address 30213 - 92nd Av E  
City GRAHAM State WA Zip Code 98338  
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 ▼ 240.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 23 / 2014  
**Transaction ID : SA11AI.86230**  
Amount of Each Receipt this Period  
10.00

**B. Virgle E McVey**  
Full Name (Last, First, Middle Initial)  
Mailing Address PO Box 342  
City AURORA State OR Zip Code 97002  
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 ▼ 220.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 08 / 2014  
**Transaction ID : SA11AI.86183**  
Amount of Each Receipt this Period  
10.00

**C. IRA W MORRIS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 16941 SE FRANCIS  
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 ▼ 250.00

Date of Receipt  
M M M / D D D / Y Y Y Y Y Y  
06 / 18 / 2014  
**Transaction ID : SA11AI.86446**  
Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	270.00
<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 58
	<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. Arne Nielsen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6208 - 4th St NE

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 ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86601**

Amount of Each Receipt this Period  
30.00

**B. Arne Nielsen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6208 - 4th St NE

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 ▼  
480.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86609**

Amount of Each Receipt this Period  
30.00

**C. Arne Nielsen**  
Full Name (Last, First, Middle Initial)  
Mailing Address 6208 - 4th St NE

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 ▼  
510.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86617**

Amount of Each Receipt this Period  
30.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	90.00
<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 39 OF 58
	<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. Arne Nielsen</b>			Date of Receipt MM / DD / YYYY 06 / 23 / 2014 <b>Transaction ID : SA11AI.86625</b>
Mailing Address 6208 - 4th St NE			Amount of Each Receipt this Period 30.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 540.00		

Full Name (Last, First, Middle Initial) <b>B. FRANK NORTH</b>			Date of Receipt MM / DD / YYYY 06 / 05 / 2014 <b>Transaction ID : SA11AI.86339</b>
Mailing Address 1325 GRANADA AVE			Amount of Each Receipt this Period 10.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) <b>C. FRANK NORTH</b>			Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : SA11AI.86346</b>
Mailing Address 1325 GRANADA AVE			Amount of Each Receipt this Period 10.00
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: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<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 40 OF 58
	<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 ▼  
250.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	19	/	2014

**Transaction ID : SA11AI.86353**

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 ▼  
260.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	26	/	2014

**Transaction ID : SA11AI.86360**

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 ▼  
360.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86269**

Amount of Each Receipt this Period  
60.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....	80.00
<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 41 OF 58
	<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="06"/> / <input type="text" value="05"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86600</b>
TACOMA	WA	98408	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="420.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86616</b>
TACOMA	WA	98408	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="440.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.86626</b>
TACOMA	WA	98408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="40.00"/>
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="480.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="80.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 58
	<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. SHANE PEDERSON</b>		Date of Receipt
Mailing Address 18222 S Arnett Drive		<input type="text" value="06"/> / <input type="text" value="23"/> / <input type="text" value="2014"/>
City State Zip Code OREGON CITY OR 97045		<b>Transaction ID : SA11AI.86422</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period <input type="text" value="200.00"/>
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="247.00"/>	

Full Name (Last, First, Middle Initial) <b>B. SHANE PEDERSON</b>		Date of Receipt
Mailing Address 18222 S Arnett Drive		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City State Zip Code OREGON CITY OR 97045		<b>Transaction ID : SA11AI.86425</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 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="257.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="06"/> / <input type="text" value="03"/> / <input type="text" value="2014"/>
City State Zip Code PORTLAND OR 97211		<b>Transaction ID : SA11AI.86467</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 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="230.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="220.00"/>
<b>TOTAL</b> This Period (last page this line number only).....▶	<input type="text" value=""/>

**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 58
	<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="06"/> / <input type="text" value="10"/> / <input type="text" value="2014"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86486</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="240.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="06"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86473</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="250.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DAVID PORTER</b>		Date of Receipt
Mailing Address 4123 NE Rodney		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2014"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.86480</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="260.00"/>	

<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 44 OF 58
	<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. George Rampp</b>		Date of Receipt
Mailing Address 3035 Eden Valley Rd		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
PORT ANGELES	WA	98362
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.86433</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

Full Name (Last, First, Middle Initial) <b>B. Robert Schwartz</b>		Date of Receipt
Mailing Address 3108 NE 135th Av		<input type="text" value="06"/> / <input type="text" value="18"/> / <input type="text" value="2014"/>
City	State	Zip Code
VANCOUVER	WA	98682
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.86652</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Retired	Retired	<input type="text" value="540.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="540.00"/>	

Full Name (Last, First, Middle Initial) <b>C. Becky Seebach</b>		Date of Receipt
Mailing Address 6209 185th Ave. E		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
BONNEY LAKE	WA	98391
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.86194</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
PMA	Longshore Worker	<input type="text" value="500.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="500.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="1540.00"/>
<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 45 OF 58
	<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 ▼ **235.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86633**

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 ▼ **245.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86634**

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 ▼ **255.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.86635**

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 58
	<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 A SERRATO</b>			Date of Receipt MM / DD / YYYY 06 / 26 / 2014 <b>Transaction ID : SA11Al.86636</b>
Mailing Address 2017 235TH PLACE			Amount of Each Receipt this Period 10.00
City TORRANCE	State CA	Zip Code 90501	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 265.00
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. Michael Shaler</b>			Date of Receipt MM / DD / YYYY 06 / 23 / 2014 <b>Transaction ID : SA11Al.86216</b>
Mailing Address PO Box 5072			Amount of Each Receipt this Period 510.00
City Everett	State WA	Zip Code 98206	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 510.00
Name of Employer PMA		Occupation longshore	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Robert Syrovatka</b>			Date of Receipt MM / DD / YYYY 06 / 12 / 2014 <b>Transaction ID : SA11Al.86224</b>
Mailing Address 5017 58th Ave Ct W			Amount of Each Receipt this Period 500.00
City University Pl	State WA	Zip Code 98467	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 500.00
Name of Employer PMA		Occupation longshore	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<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 47 OF 58
	<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. KENNETH L. TESTER**  
Full Name (Last, First, Middle Initial)

Mailing Address 15891 S EADEN ROAD

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:  
 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  
 06 / 18 / 2014  
**Transaction ID : SA11AI.86421**

Amount of Each Receipt this Period  
 250.00

**B. Alyn L Vail**  
Full Name (Last, First, Middle Initial)

Mailing Address 12515 NE 50th Av

City VANCOUVER State WA Zip Code 98665

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  
 06 / 18 / 2014  
**Transaction ID : SA11AI.86651**

Amount of Each Receipt this Period  
 500.00

**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 ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86495**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 760.00

**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 58
	<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 ▼ 240.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 12 / 2014  
**Transaction ID : SA11AI.86497**

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 ▼ 250.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 19 / 2014  
**Transaction ID : SA11AI.86499**

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 ▼ 260.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86501**

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 49 OF 58
	<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 ▼ 205.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 26 / 2014  
**Transaction ID : SA11AI.86559**

Amount of Each Receipt this Period  
 10.00

**B. Daniel Walker**  
Full Name (Last, First, Middle Initial)

Mailing Address 17416 NE 200th Circle

City BATTLE GROUND State WA Zip Code 98604

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 ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 30 / 2014  
**Transaction ID : SA11AI.86186**

Amount of Each Receipt this Period  
 500.00

**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 ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 06 / 05 / 2014  
**Transaction ID : SA11AI.86598**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 520.00

**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 50 OF 58
	<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 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 ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86607**

Amount of Each Receipt this Period  
10.00

**B. 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 ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86614**

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 ▼  
240.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86623**

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 51 OF 58
	<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. WILLIAM A WATKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7805 - 99th Av SW

City LAKEWOOD	State WA	Zip Code 98498
------------------	-------------	-------------------

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
06	/	05	/	2014

**Transaction ID : SA11AI.86305**

Amount of Each Receipt this Period  

20.00
-------

**B. WILLIAM A WATKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7805 - 99th Av SW

City LAKEWOOD	State WA	Zip Code 98498
------------------	-------------	-------------------

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  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	05	/	2014

**Transaction ID : SA11AI.86306**

Amount of Each Receipt this Period  

20.00
-------

**C. WILLIAM A WATKINS**  
Full Name (Last, First, Middle Initial)

Mailing Address 7805 - 99th Av SW

City LAKEWOOD	State WA	Zip Code 98498
------------------	-------------	-------------------

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 ▼ **460.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2014

**Transaction ID : SA11AI.86315**

Amount of Each Receipt this Period  

20.00
-------

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

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

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

FOR LINE NUMBER: PAGE 52 OF 58  
(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. WILLIAM A WATKINS**  
Full Name (Last, First, Middle Initial)  
Mailing Address 7805 - 99th Av SW  
City LAKEWOOD State WA Zip Code 98498  
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 ▼ 480.00

Date of Receipt  
M M / D D / Y Y Y Y Y Y  
06 / 23 / 2014  
**Transaction ID : SA11AI.86316**  
Amount of Each Receipt this Period  
20.00

**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 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 Y Y  
Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> This Period (last page this line number only).....▶	13736.54

**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**

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 FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 37

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

**Transaction ID : SB23.86160**

Amount of Each Disbursement this Period

1	5	0	0	.	0	0
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. BRUCE L. BRALEY**

Mailing Address 247 SHERIDAN ROAD

City WATERLOO State IA Zip Code 50701

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**BRALEY FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: IA District: 01

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	4

**Transaction ID : SB23.86118**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. JULIA BROWNLEY**

Mailing Address 5613 FOXWOOD DRIVE

City OAK PARK State CA Zip Code 91377

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**JULIA BROWNLEY FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 26

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

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

**Transaction ID : SB23.86134**

Amount of Each Disbursement this Period

1	0	0	0	.	0	0
---	---	---	---	---	---	---

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

5	0	0	0	.	0	0
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**TOTAL** This Period (last page this line number only)..... ▶

5	0	0	0	.	0	0
---	---	---	---	---	---	---

**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. JAMES E CLYBURN**

Mailing Address 501 Juniper Street

City Columbia State SC Zip Code 29203

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**FRIENDS OF JIM CLYBURN**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: SC District: 06

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	7		2	0	1	4

**Transaction ID : SB23.86165**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**B. ELIJAH E CUMMINGS**

Mailing Address 2235 Rayburn House Office Bldg.

City Washington State DC Zip Code 20515

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**CUMMINGS FOR CONGRESS CAMPAIGN CMTE**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: MD District: 07

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	4

**Transaction ID : SB23.86138**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**C. MARK DESAULNIER**

Mailing Address Post Office Box 6066

City Concord State CA Zip Code 94524

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**DESAULNIER FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 10

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	3		2	0	1	4

**Transaction ID : SB23.86119**

Amount of Each Disbursement this Period

1	5	0	0	0	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

3	5	0	0	0	0	0	0	0	0
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1	0	0	0	0	0	0	0	0	0
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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. TULSI GABBARD**

Mailing Address 55 S KUKUI STREET #2510

City HONOLULU State HI Zip Code 96813

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**TULSI FOR HAWAII**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: HI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	5		2	0	1	4

**Transaction ID : SB23.86700**

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

**B. JANICE HAHN**

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

**Janice Hahn for Congress**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

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

**Transaction ID : SB23.86117**

Amount of Each Disbursement this Period

1	5	0	0	0	0
---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. HUFFMAN, JARED MR**

Mailing Address PO BOX 151563

City SAN RAFAEL State CA Zip Code 94915

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**HUFFMAN FOR CONGRESS 2014**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 02

Date of Disbursement

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

**Transaction ID : SB23.86128**

Amount of Each Disbursement this Period

1	0	0	0	0	0
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

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

5	0	0	0	0	0
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5	0	0	0	0	0
---	---	---	---	---	---

**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. DONNA MERCADO KIM**

Mailing Address PO BOX 2493

City HONOLULU State HI Zip Code 96804

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**DONNA MERCADO KIM FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: HI District: 01

Date of Disbursement

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

**Transaction ID : SB23.86144**

Amount of Each Disbursement this Period

4	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**B. TED LIEU**

Mailing Address 6380 WILSHIRE BLVD #1612

City LOS ANGELES State CA Zip Code 90048

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**TED LIEU FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 33

Date of Disbursement

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

**Transaction ID : SB23.86114**

Amount of Each Disbursement this Period

5	0	0	0	0	0	0	0	0	0
---	---	---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

**C. FRANK A, LOBIONDO**

Mailing Address 8 S. Somerset Avenue

City Ventnor State NJ Zip Code 08406

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**LOBIONDO FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: NJ District: 02

Date of Disbursement

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

**Transaction ID : SB23.86120**

Amount of Each Disbursement this Period

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

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

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

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

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



**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. ALAN LOWENTHAL**

Mailing Address 2809 EAST 1ST ST.

City State Zip Code  
LONG BEACH CA 90803

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**ALAN LOWENTHAL FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 47

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	20	/	2014

**Transaction ID : SB23.86146**

Amount of Each Disbursement this Period

1000.00
---------

Full Name (Last, First, Middle Initial)

**B. PATTY MURRAY**

Mailing Address BOX 3662

City State Zip Code  
SEATTLE WA 98124

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**PEOPLE FOR PATTY MURRAY**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: WA District: 00

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	03	/	2014

**Transaction ID : SB23.86136**

Amount of Each Disbursement this Period

750.00
--------

Full Name (Last, First, Middle Initial)

**C. LUCILLE ROYBAL-ALLARD**

Mailing Address 601 S GLENOAKS BLVD SUITE 211

City State Zip Code  
BURBANK CA 91502

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**LUCILLE ROYBAL-ALLARD FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: CA District: 34

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	20	/	2014

**Transaction ID : SB23.86151**

Amount of Each Disbursement this Period

1000.00
---------

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

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

2750.00
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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. BRAD SHERMAN

Mailing Address 20929 VENTURA BLVD #615

City WOODLAND HILLS State CA Zip Code 91364

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**SHERMAN FOR CONGRESS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 24

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2014

Transaction ID : SB23.86116

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

### B. JUAN C. VARGAS

Mailing Address 5429 MADISON AVE

City SACRAMENTO State CA Zip Code 95841

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**FRIENDS OF JUAN VARGAS**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 51

Date of Disbursement

MM / DD / YYYY  
06 / 18 / 2014

Transaction ID : SB23.86156

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

### C. RICHARD PAUL WEILAND

Mailing Address PO BOX 222

City MADISON State SD Zip Code 57042

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**PEOPLE FOR WEILAND**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: SD District: 01

Date of Disbursement

MM / DD / YYYY  
06 / 02 / 2014

Transaction ID : SB23.86137

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)..... ▶

30750.00