

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
American Maritime Officers Voluntary Political Action Fund

ADDRESS (number and street) 2 West Dixie Highway  
Dania Beach FL 33004  
 Check if different than previously reported. (ACC)

2. **FEC IDENTIFICATION NUMBER** C00027532  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 07 01 2007 through 07 31 2007

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 Edward Kelly

Signature of Treasurer Electronically Filed by Edward Kelly Date 08 09 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

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

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		94741.71
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	39871.70									
(c) Total Receipts (from Line 19) .....	28286.00	294147.91								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	68157.70	388889.62								
<hr/>										
7. Total Disbursements (from Line 31) .....	59506.00	380237.92								
<hr/>										
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	8651.70	8651.70								
<hr/>										
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
<hr/>										
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

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

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	7

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	11993.00	114615.91
(i) Itemized (use Schedule A) .....	16293.00	173032.00
(ii) Unitemized .....	28286.00	287647.91
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	28286.00	287647.91
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	6500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	28286.00	294147.91
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	28286.00	294147.91

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	56500.00	375800.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	300.00	550.00
(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)) .....	300.00	550.00
29. Other Disbursements.....	2706.00	3887.92
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	59506.00	380237.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	59506.00	380237.92

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	28286.00	287647.91
34. Total Contribution Refunds (from Line 28(d)) .....	300.00	550.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	27986.00	287097.91
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 39
	<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)  
American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial) <b>A. DEREK ALLEY</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007	
Mailing Address 1026 Masons Bay Road		<b>Transaction ID: SA11A1.43856</b>	
City State Zip Code Jonesport ME 04649		Amount of Each Receipt this Period 125.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 245.00	

Full Name (Last, First, Middle Initial) <b>B. RYAN ARNOLD</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address 4400 Lee Center Taberg Road		<b>Transaction ID: SA11A1.44010</b>	
City State Zip Code Taberg NY 13471		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>C. MICHAEL BARRY</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address 123 Shadow Lawn Avenue		<b>Transaction ID: SA11A1.43970</b>	
City State Zip Code Pass Christian MS 39571		Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	475.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. STEVEN BOND</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2007	
Mailing Address P.O. BOX 571		<b>Transaction ID: SA11A1.44021</b>	
City <b>WINTHROP</b>	State <b>ME</b>	Amount of Each Receipt this Period 200.00	
Zip Code <b>04364</b>		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer SEALIFT, INC.	Occupation <b>MASTER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>B. PAUL BRADY</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 19 / 2007	
Mailing Address 2 WOODVIEW STREET SAMFORD, QLD		<b>Transaction ID: SA11A1.43950</b>	
City <b>AUSTRALIA 4520</b>	State QLD	Amount of Each Receipt this Period 400.00	
Zip Code <b>4520</b>		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MAERSK LINE LTD	Occupation <b>Chief Mate</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) <b>C. JOSEPH BRAUN</b>		Date of Receipt M M / D D / Y Y Y Y Y 07 / 26 / 2007	
Mailing Address 757 SE 17TH ST. PMB 321		<b>Transaction ID: SA11A1.43972</b>	
City <b>FORT LAUDERDALE</b>	State <b>FL</b>	Amount of Each Receipt this Period 400.00	
Zip Code <b>33316</b>		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer PRONAV SHIP MANAGEMENT	Occupation <b>Chief Mate</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	1000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
PATRICK BROWN

Mailing Address 5800 BEACH BLVD  
SUITE 203 #169

City JACKSONVILLE State FL Zip Code 32207

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43918

Amount of Each Receipt this Period  
500.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN CIASTKEWICZ

Mailing Address 1225 NW 21ST STREET  
#2004

City STUART State FL Zip Code 34994

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 26 / 2007

Transaction ID: SA11A1.44013

Amount of Each Receipt this Period  
200.00

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

Mailing Address 5 MILITARY AVE

City FAIRFIELD State ME Zip Code 04937

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

Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 26 / 2007

Transaction ID: SA11A1.44022

Amount of Each Receipt this Period  
500.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1200.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
LUIS CORREA

Mailing Address 5085 NW 7th Street  
Apt 711

City MIAMI State FL Zip Code 33126

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: SA11A1.43900

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
JOHN D'ALESSANDRO

Mailing Address 15515 PINE MT DR

City HOUSTON State TX Zip Code 77084

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

Name of Employer VARIOUS SHIPPING COMPANIES Occupation MERCHANT MARINE OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 09 / 2007

Transaction ID: SA11A1.43849

Amount of Each Receipt this Period  
300.00

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

Mailing Address 15552 97TH RD. N.

City WEST PALM BEACH State FL Zip Code 33412

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43912

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 500.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
JEFFREY DUNN

Mailing Address 278 BLACK BARON DR.

City DELRAN State NJ Zip Code 08075

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

Name of Employer SEABULK INTERNATIONAL Occupation 2ND ENGINEER DIESEL

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 19 / 2007

Transaction ID: SA11A1.43956

Amount of Each Receipt this Period  
 150.00

**B.** Full Name (Last, First, Middle Initial)  
ARMANDO EVANGELISTA

Mailing Address 4590 CRYSTAL BROOK WAY

City JACKSONVILLE BCH State FL Zip Code 32224

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

Name of Employer TRANSOCEANIC CABLE SHIP Occupation 3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 09 / 2007

Transaction ID: SA11A1.43855

Amount of Each Receipt this Period  
 20.00

**C.** Full Name (Last, First, Middle Initial)  
FRANK FINGERHUT

Mailing Address 2480 IRVINE BLVD.  
APT. 202

City TUSTIN State CA Zip Code 92782

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

Name of Employer TRANSOCEANIC CABLE SHIP CO. Occupation CHIEF OFFICER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
 M M / D D / Y Y Y Y  
 07 / 13 / 2007

Transaction ID: SA11A1.43892

Amount of Each Receipt this Period  
 200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	370.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. PATRICK GRIFFIN</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2007	
Mailing Address 26 GLENCOVE AVE.		<b>Transaction ID: SA11A1.43920</b>	
City State Zip Code BANGOR ME 04401		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. JOHN HAFNER</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2007	
Mailing Address 4780 NW 122ND DRIVE		<b>Transaction ID: SA11A1.43815</b>	
City State Zip Code CORAL SPRINGS FL 33076		Amount of Each Receipt this Period 200.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies Occupation Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. EVERETT HATTON</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007	
Mailing Address 136-E Versailles Dr		<b>Transaction ID: SA11A1.43857</b>	
City State Zip Code Melbourne Beach FL 32951		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer SEABULK TANKERS, INC. Occupation Chief Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. ROBERT HAYBALL</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 11 / 2007	
Mailing Address 3540 N. REYNOLDS CIRCLE		<b>Transaction ID: SA11A1.43866</b>	
City State Zip Code MESA AZ 85215	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) <b>B. DAVID HUNT</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2007	
Mailing Address 7521 ELIASON RD		<b>Transaction ID: SA11A1.43928</b>	
City State Zip Code STURGEON BAY WI 54235	Amount of Each Receipt this Period 140.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMERICAN STEAMSHIP CO.	Occupation 3rd Asst Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 298.00		

Full Name (Last, First, Middle Initial) <b>C. PETER JORGENSEN</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007	
Mailing Address 634 IANA ST.		<b>Transaction ID: SA11A1.43829</b>	
City State Zip Code KAILUA HI 96734	Amount of Each Receipt this Period 250.00		
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer MAERSK LINE LTD	Occupation 2nd Mate		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	490.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. TONY KAPLAN</b>		Date of Receipt MM / DD / YYYY 07 / 26 / 2007
Mailing Address P.O. BOX 861		<b>Transaction ID: SA11A1.43973</b>
City <b>VOLCANO</b>	State <b>HI</b>	Zip Code <b>96785</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>B. ROBERT KELLY</b>		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 26 UPLAND WAY		<b>Transaction ID: SA11A1.43901</b>
City <b>MATTAPOISETT</b>	State <b>MA</b>	Zip Code <b>02739</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. HELLIAS KIBODEAUX</b>		Date of Receipt MM / DD / YYYY 07 / 16 / 2007
Mailing Address 7423 CAMEO ST		<b>Transaction ID: SA11A1.43907</b>
City <b>NEW ORLEANS</b>	State <b>LA</b>	Zip Code <b>70124</b>
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. ROBERT KIEFER</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 06 / 2007	
Mailing Address 89 BARKER AVE		<b>Transaction ID: SA11A1.43814</b>	
City SHARON HILL	State PA	Zip Code 19079	Amount of Each Receipt this Period 200.00
FEC ID number of contributing federal political committee. C			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00		

Full Name (Last, First, Middle Initial) <b>B. JOSEPH LENTOWICH</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 09 / 2007	
Mailing Address 1115 11TH AVE		<b>Transaction ID: SA11A1.43831</b>	
City HOUGHTON	State MI	Zip Code 49931	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer VARIOUS SHIPPING COMPANIES	Occupation MERCHANT MARINE OFFICER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) <b>C. SUSAN LIEBLEIN</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address 2185 MORRISON AVE		<b>Transaction ID: SA11A1.44027</b>	
City LAKEWOOD	State OH	Zip Code 44117	Amount of Each Receipt this Period 152.00
FEC ID number of contributing federal political committee. C			
Name of Employer BELL STEAMSHIP CO.	Occupation 2nd Asst Engineer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	852.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
JAMES LLOYD III

Mailing Address 2970 OAKLAND DR.

City State Zip Code  
GREEN COVE SPRINGS FL 32043

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

Name of Employer Various Shipping Companies  
Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 13 / 2007

Transaction ID: SA11A1.43875

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
KENNETH MARCELLE

Mailing Address 970 JEFFERSON PLACE

City State Zip Code  
STURGEON BAY WI 54235

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

Name of Employer AMERICAN STEAMSHIP CO.  
Occupation Chief Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
600.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 02 / 2007

Transaction ID: SA11A1.43808

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
PEDRO MARTINEZ

Mailing Address 8022 N. GOMEZ AVE

City State Zip Code  
TAMPA FL 33614

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

Name of Employer Various Shipping Companies  
Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
300.00

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 24 / 2007

Transaction ID: SA11A1.43962

Amount of Each Receipt this Period  
100.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

**A.** Full Name (Last, First, Middle Initial)  
TIMOTHY MC GEEIN

Mailing Address 1808 DUKE OF YORK QUAY

City State Zip Code  
VIRGINIA BCH VA 23454

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

Name of Employer INTEROCEAN UGLAND MGMT. Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43957

Amount of Each Receipt this Period  
400.00

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

Mailing Address 55 Rick's way

City State Zip Code  
Buxton ME 04093

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

Name of Employer TRANSOCEANIC CABLE SHIP Occupation 2nd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 09 / 2007

Transaction ID: SA11A1.43860

Amount of Each Receipt this Period  
200.00

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

Mailing Address 10 JILL COURT

City State Zip Code  
RIVERSIDE RI 02915

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

Name of Employer MARITRANS G.P., INC. Occupation 3rd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 13 / 2007

Transaction ID: SA11A1.43902

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **700.00**

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. NICHOLAS NOVICK</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2007	
Mailing Address P.O. BOX 925		<b>Transaction ID: SA11A1.43924</b>	
City State Zip Code CAPTAIN COOK HI 96704		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation MAERSK LINE LTD 2nd Mate			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. JERED NOWAK</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 19 / 2007	
Mailing Address 3109 GILLINGS ROAD		<b>Transaction ID: SA11A1.43916</b>	
City State Zip Code PRESCOTT MI 48756		Amount of Each Receipt this Period 146.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Various Shipping Companies Merchant Marine Officer			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 335.00	

Full Name (Last, First, Middle Initial) <b>C. CHARLES PHELAN</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address 1007 SOUTHGATE DR.		<b>Transaction ID: SA11A1.43979</b>	
City State Zip Code ELIZABETHTON TN 37643		Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AMERICAN OVERSEAS MARINE 2nd Asst Engineer			
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) ..... ▶	846.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
CEZARY PONINSKI

Mailing Address 34-19 90th Street  
Apt A61

City Jackson Heights State NY Zip Code 11372

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43934

Amount of Each Receipt this Period  
100.00

**B.** Full Name (Last, First, Middle Initial)  
CARL POTTEY

Mailing Address 5 FARM ST.

City CANTON State MA Zip Code 02021

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

Name of Employer AMERICAN OVERSEAS MARINE Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43938

Amount of Each Receipt this Period  
400.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL REILLY

Mailing Address 7 RIUNITE RD

City SETAUKET State NY Zip Code 11733

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

Name of Employer AMERICAN OVERSEAS MARINE Occupation Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2007

Transaction ID: SA11A1.43982

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 800.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 4717 TRENTON ST. #A

City State Zip Code  
METAIRIE LA 70006

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE 2nd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
07 / 09 / 2007

Transaction ID: SA11A1.43820

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
STEPHEN ROBERTSON

Mailing Address 356 E. CALLE CRIBA

City State Zip Code  
SAHUARITA AZ 83629

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

Name of Employer Occupation  
Various Shipping Companies Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 209.00

Date of Receipt  
07 / 26 / 2007

Transaction ID: SA11A1.44017

Amount of Each Receipt this Period  
138.00

**C.** Full Name (Last, First, Middle Initial)  
HOWARD SCHOENLY

Mailing Address 817 HICKS ROAD

City State Zip Code  
DICKSON TN 37055

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

Name of Employer Occupation  
INTEROCEAN UGLAND MGMT. 2nd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
07 / 26 / 2007

Transaction ID: SA11A1.44014

Amount of Each Receipt this Period  
200.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	638.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

**A.** Full Name (Last, First, Middle Initial)  
GARY THOMPSON

Mailing Address 246 S 4TH ST.

City State Zip Code  
ROGERS CITY MI 49779

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 329.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2007

Transaction ID: SA11A1.44001

Amount of Each Receipt this Period  
144.00

**B.** Full Name (Last, First, Middle Initial)  
JUSTIN VONSPRECKEN

Mailing Address 6122 ALLIENE

City State Zip Code  
LUDINGTON MI 49431

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

Name of Employer KEY LAKES, INC. Occupation 3rd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 264.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 19 / 2007

Transaction ID: SA11A1.43935

Amount of Each Receipt this Period  
135.00

**C.** Full Name (Last, First, Middle Initial)  
KATE WALL

Mailing Address 524 THICKET STREET

City State Zip Code  
WEYMOUTH MA 02190

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

Name of Employer AMERICAN OVERSEAS MARINE Occupation 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 26 / 2007

Transaction ID: SA11A1.44008

Amount of Each Receipt this Period  
250.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	529.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) <b>A. RYAN WALL</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address 524 THICKET STREET		<b>Transaction ID: SA11A1.44024</b>	
City WEYMOUTH	State MA	Zip Code 02190	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer AMERICAN OVERSEAS MARINE	Occupation 3rd Asst Engineer		
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>B. JON WATSON</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 13 / 2007	
Mailing Address		<b>Transaction ID: SA11A1.43886</b>	
City	State	Zip Code	Amount of Each Receipt this Period 93.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.00		

Full Name (Last, First, Middle Initial) <b>C. JAMES WATSON, JR.</b>		Date of Receipt M M / D D / Y Y Y Y 07 / 26 / 2007	
Mailing Address P.O. BOX 2932		<b>Transaction ID: SA11A1.43971</b>	
City OCEANSIDE	State CA	Zip Code 92051	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶	893.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) <b>A. STEVEN WEBSTER</b>		Date of Receipt MM / DD / YYYY 07 / 19 / 2007
Mailing Address 351 ZENITH LANE		<b>Transaction ID: SA11A1.43955</b>
City JUNO BEACH	State FL	Zip Code 33408
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) <b>B. PETER WILISCH</b>		Date of Receipt MM / DD / YYYY 07 / 13 / 2007
Mailing Address 1589 ANNISTON AVE.		<b>Transaction ID: SA11A1.43873</b>
City HOLY HILL	State FL	Zip Code 32117
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 400.00	
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) <b>C. BRIAN YOUNG</b>		Date of Receipt MM / DD / YYYY 07 / 09 / 2007
Mailing Address		<b>Transaction ID: SA11A1.43858</b>
City	State	Zip Code
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 200.00	
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>700.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11993.00</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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

**A.** Full Name (Last, First, Middle Initial)  
ALAN MOLLOHAN FOR CONGRESS

Mailing Address PO BOX 1343

City FAIRMONT State WV Zip Code 26555

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.43797

Date of Disbursement

07 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
ALASKANS FOR DON YOUNG INC.

Mailing Address 2504 Fairbanks Street

City Anchorage State AK Zip Code 99503

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: AK District: 00

Transaction ID: SB23.43766

Date of Disbursement

07 / 20 / 2007

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
BRIAN BILBRAY FOR CONGRESS

Mailing Address 2466 UNICORNIO STREET

City CARLSBAD State CA Zip Code 92009

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: CA District: 50

Transaction ID: SB23.43791

Date of Disbursement

07 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. CITIZENS FOR BUNNING</b>		<b>Transaction ID:</b> SB23.43767 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address 1717 DIXIE HIGHWAY SUITE 180		Amount of Each Disbursement this Period 1000.00
City FT WRIGHT State KY Zip Code 41011		
Purpose of Disbursement CONTRIBUTION Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. CMTE TO RE-ELECT NYDIA M. VELAZQUEZ TO CONGRESS</b>		<b>Transaction ID:</b> SB23.43802 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 315 INSPIRATION LANE		Amount of Each Disbursement this Period 1000.00
City GAITHERSBURG State MD Zip Code 20878		
Purpose of Disbursement CONTRIBUTION Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. COMMITTEE TO ELECT MCHUGH</b>		<b>Transaction ID:</b> SB23.43768 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address PO BOX 70052		Amount of Each Disbursement this Period 2000.00
City WASHINGTON State DC Zip Code 20024		
Purpose of Disbursement CONTRIBUTION Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. CONYERS FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.43759 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address 1031 N EDGEWOOD STREET		Amount of Each Disbursement this Period 2500.00
City ARLINGTON State VA Zip Code 22201	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. DAVE CAMP FOR CONGRESS 2008</b>		<b>Transaction ID:</b> SB23.43786 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 5915 EASTMAN AVE. SUITE 100 5915 EASTMAN AVE. SUITE 100		Amount of Each Disbursement this Period 1000.00
City MIDLAND State MI Zip Code 48640	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. DAVID DAVIS VICTORY FUND</b>		<b>Transaction ID:</b> SB23.43769 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address 2016 NORTHWOOD DRIVE		Amount of Each Disbursement this Period 1000.00
City JOHNSON CITY State TN Zip Code 37601	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. EARL POMEROY FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.43770 Date of Disbursement
Mailing Address POST OFFICE BOX 746		<input type="text" value="07"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
City BISMARCK	State ND	Zip Code 58502
Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF FRANK WOLF</b>		<b>Transaction ID:</b> SB23.43758 Date of Disbursement
Mailing Address P.O. BOX 710235		<input type="text" value="07"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
City OAK HILL	State VA	Zip Code 20171
Purpose of Disbursement CONTRIBUTION	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF JIM CLYBURN</b>		<b>Transaction ID:</b> SB23.43800 Date of Disbursement
Mailing Address PO BOX 12567		<input type="text" value="07"/> / <input type="text" value="27"/> / <input type="text" value="2007"/>
City COLUMBIA	State SC	Zip Code 29211
Purpose of Disbursement CONTRIBUTION	<input type="text" value="2500.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF JIM INHOFE COMMITTEE</b>		<b>Transaction ID:</b> SB23.43771 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address PO BOX 13300		Amount of Each Disbursement this Period 1000.00
City OKLAHOMA CITY State OK Zip Code 73113	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF JIM SAXTON</b>		<b>Transaction ID:</b> SB23.43750 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address PO BOX 795		Amount of Each Disbursement this Period 1000.00
City MOUNT HOLLY State NJ Zip Code 08060	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. FRIENDS OF RAY LAHOOD</b>		<b>Transaction ID:</b> SB23.43751 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address 4238 N Knoxville Ave 4238 N Knoxville Ave		Amount of Each Disbursement this Period 1000.00
City Peoria State IL Zip Code 61614	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. FRIENDS OF SHERROD BROWN</b>		<b>Transaction ID: SB23.43794</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 607 14TH STREET NW SUITE 800		Amount of Each Disbursement this Period 1000.00
City WASHINGTON State DC Zip Code 20005	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. GALLEGLY FOR CONGRESS</b>		<b>Transaction ID: SB23.43752</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address PO BOX 940001		Amount of Each Disbursement this Period 1000.00
City SIMI VALLEY State CA Zip Code 93094	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 24	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. GARY MILLER FOR CONGRESS</b>		<b>Transaction ID: SB23.43754</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address 721 S BREA CANYON ROAD SUITE 7		Amount of Each Disbursement this Period 1000.00
City DIAMOND BAR State CA Zip Code 91789	Category/ Type	
Purpose of Disbursement CONTRIBUTION		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. HOOSIERS SUPPORTING BUYER FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.43790 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 200 NORTH MAIN ST PO BOX 712		Amount of Each Disbursement this Period 2500.00
City MONTICELLO State IN Zip Code 47960		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. KNOLLENBERG FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.43788 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 31000 TELEGRAPH ROAD #110		Amount of Each Disbursement this Period 1000.00
City BINGHAM FARMS State MI Zip Code 48025		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LARSON FOR CONGRESS</b>		<b>Transaction ID:</b> SB23.43763 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address 29 RUFF CIRCLE		Amount of Each Disbursement this Period 2500.00
City GLASTONBURY State CT Zip Code 06033		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. LATHAM FOR CONGRESS</b>		Transaction ID: SB23.43774 Date of Disbursement 07 / 20 / 2007
Mailing Address 120 CENTRAL AVENUE W PO BOX 71		Amount of Each Disbursement this Period 2000.00
City CLARION State IA Zip Code 50525	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. LAUTENBERG FOR SENATE</b>		Transaction ID: SB23.43776 Date of Disbursement 07 / 20 / 2007
Mailing Address RIVERFRONT PLAZA STATION PO BOX 200596		Amount of Each Disbursement this Period 1000.00
City NEWARK State NJ Zip Code 07102	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. LEWIS FOR CONGRESS COMMITTEE</b>		Transaction ID: SB23.43753 Date of Disbursement 07 / 13 / 2007
Mailing Address PO BOX 247		Amount of Each Disbursement this Period 2000.00
City REDLANDS State CA Zip Code 92373	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 41	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	5000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. LINCOLN DIAZ-BALART FOR CONGRESS CMTE</b>		<b>Transaction ID: SB23.43785</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 95 MERRICK WAY SUITE 250		Amount of Each Disbursement this Period 1000.00
City CORAL GABLES State FL Zip Code 33134		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. LOT OF PEOPLE FOR DAVE OBEY</b>		<b>Transaction ID: SB23.43777</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address PO BOX 1322		Amount of Each Disbursement this Period 2500.00
City WAUSAU State WI Zip Code 54402		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. MCNERNEY FOR CONGRESS</b>		<b>Transaction ID: SB23.43795</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 6520 VILLAGE PARKWAY		Amount of Each Disbursement this Period 1000.00
City DUBLIN State CA Zip Code 94568		
Purpose of Disbursement CONTRIBUTION Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. PASTOR FOR ARIZONA</b>		<b>Transaction ID: SB23.43760</b>	
Mailing Address PO BOX 6554		Date of Disbursement 07 / 13 / 2007	
City PHOENIX	State AZ	Zip Code 85005	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ	District: 02		

Full Name (Last, First, Middle Initial) <b>B. PEOPLE FOR PATTY MURRAY US SENATE</b>		<b>Transaction ID: SB23.43798</b>	
Mailing Address PO BOX 3662		Date of Disbursement 07 / 27 / 2007	
City SEATTLE	State WA	Zip Code 98124	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA	District:		

Full Name (Last, First, Middle Initial) <b>C. PEOPLE FOR PATTY MURRAY US SENATE</b>		<b>Transaction ID: SB23.43799</b>	
Mailing Address PO BOX 3662		Date of Disbursement 07 / 27 / 2007	
City SEATTLE	State WA	Zip Code 98124	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: WA	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. PETE KING FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.43778</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address POST OFFICE BOX 1428		Amount of Each Disbursement this Period 1000.00
City SEAFORD State NY Zip Code 11783	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. PETE KING FOR CONGRESS COMMITTEE</b>		<b>Transaction ID: SB23.43792</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address POST OFFICE BOX 1428		Amount of Each Disbursement this Period 1000.00
City SEAFORD State NY Zip Code 11783	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. SECURE PAC</b>		<b>Transaction ID: SB23.43780</b> Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address PO BOX 675		Amount of Each Disbursement this Period 2500.00
City BOLTON State MS Zip Code 39041	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. SERRANO FOR CONGRESS</b>		Transaction ID: SB23.43761 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 3 / 2 0 0 7
Mailing Address C/O HOROWITZ & ULLMANN PC 275 MADISON AVENUE		Amount of Each Disbursement this Period 1000.00
City NEW YORK State NY Zip Code 10016	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>B. SIMPSON FOR CONGRESS</b>		Transaction ID: SB23.43789 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 7 / 2 0 0 7
Mailing Address 1487 PARKWAY DRIVE		Amount of Each Disbursement this Period 1000.00
City BLACKFOOT State ID Zip Code 83221	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 2	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) <b>C. STUPAK FOR CONGRESS</b>		Transaction ID: SB23.43781 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 0 / 2 0 0 7
Mailing Address 817 9TH AVENUE PO BOX 143		Amount of Each Disbursement this Period 1000.00
City MENOMINEE State MI Zip Code 49858	Purpose of Disbursement CONTRIBUTION Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	_____

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. THE JUDD GREGG COMMITTEE</b>		Transaction ID: SB23.43773 Date of Disbursement 07 / 20 / 2007
Mailing Address PO BOX 1812		Amount of Each Disbursement this Period 1000.00
City CONCORD State NH Zip Code 03302	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. THE JUDD GREGG COMMITTEE</b>		Transaction ID: SB23.43793 Date of Disbursement 07 / 27 / 2007
Mailing Address PO BOX 1812		Amount of Each Disbursement this Period 1000.00
City CONCORD State NH Zip Code 03302	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. THE LARAMIE FOUNDATION</b>		Transaction ID: SB23.43765 Date of Disbursement 07 / 13 / 2007
Mailing Address P.O. BOX 1960		Amount of Each Disbursement this Period 1000.00
City LARAMIE State WY Zip Code 82073	Purpose of Disbursement CONTRIBUTION Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. THE REYES COMMITTEE, INC.</b>		<b>Transaction ID: SB23.43762</b>	
Mailing Address 1011 MONTANA AVENUE		Date of Disbursement MM / DD / YYYY 07 / 13 / 2007	
City EL PASO	State TX	Zip Code 79901	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TX	District: 16		

Full Name (Last, First, Middle Initial) <b>B. The Richard Burr Committee</b>		<b>Transaction ID: SB23.43756</b>	
Mailing Address PO BOX 5928		Date of Disbursement MM / DD / YYYY 07 / 13 / 2007	
City WINSTON-SALEM	State NC	Zip Code 27113	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) <b>C. TIM JOHNSON FOR SOUTH DAKOTA, INC.</b>		<b>Transaction ID: SB23.43783</b>	
Mailing Address P.O. BOX 1859		Date of Disbursement MM / DD / YYYY 07 / 20 / 2007	
City SIUOX FALLS	State SD	Zip Code 57101	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)

**A. TIM RYAN FOR CONGRESS**

Mailing Address 438 North Rhodes Ave.

City Niles State OH Zip Code 44446

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB23.43803

Date of Disbursement

07 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. TOM DAVIS FOR CONGRESS**

Mailing Address 6429 DOWNING COURT

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: VA District: 11

Transaction ID: SB23.43757

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

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

2000.00

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

56500.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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

Full Name (Last, First, Middle Initial) <b>A. MARK PISCH</b>		Transaction ID: SB28A.43747	
Mailing Address 135 FOURTH ST		Date of Disbursement	
City OLD TOWN State ME Zip Code 04468		07 / 02 / 2007	
Purpose of Disbursement Memb req Refund from VPAF		Amount of Each Disbursement this Period	
Candidate Name		300.00	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Category/Type	
State: District:		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	300.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	300.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

American Maritime Officers Voluntary Political Action Fund

Full Name (Last, First, Middle Initial)

**A.** Buchbinder Tunick & Company LLP

Mailing Address 6116 EXECUTIVE BLVD  
SUITE 201

City State Zip Code  
ROCKVILLE MD 20852-4920

Purpose of Disbursement  
Audit Serv Yr End 2006

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.43749

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2706.00

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

2706.00

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

2706.00