

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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=""/>	<input type="text" value="10089052.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="8271863.67"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="1441895.72"/>	<input type="text" value="5764875.76"/>
(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="9713759.39"/>	<input type="text" value="15853927.91"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="628445.58"/>	<input type="text" value="6768614.10"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="9085313.81"/>	<input type="text" value="9085313.81"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY 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)

Page 3

Write or Type Committee Name

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Report Covering the Period: From: M M / D D / Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y 11 / 24 / 2014

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).....	42135.69	122109.02
(ii) Unitemized	1394377.71	5631779.31
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	1436513.40	5753888.33
(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)	1436513.40	5753888.33
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.....	5000.00	6500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	382.32	4487.43
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))..... ▶	1441895.72	5764875.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	1441895.72	5764875.76

DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	115445.58	623601.10
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	115445.58	623601.10
22. Transfers to Affiliated/Other Party Committees.....	0.00	2053128.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	133000.00	1077000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	135.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	135.00
29. Other Disbursements	380000.00	3014750.00
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)) ..	628445.58	6768614.10
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	628445.58	6768614.10

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)	1436513.40	5753888.33
34. Total Contribution Refunds (from Line 28(d))	0.00	135.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1436513.40	5753753.33
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	115445.58	623601.10
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	115445.58	623601.10

**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 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ROBERT ACKERMANN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1523 CASTILLO ST.,APT. 2
 City SANTA BARBARA State CA Zip Code 93101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.142637
 Amount of Each Receipt this Period
 200.00

B. JEFFERY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 557 LITTLE RIVER LOOP APT.#222
 City ALTAMONTE SPRINGS State FL Zip Code 32714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11Al.142994
 Amount of Each Receipt this Period
 70.00

C. JEFFERY ALLEN
 Full Name (Last, First, Middle Initial)
 Mailing Address 557 LITTLE RIVER LOOP APT.#222
 City ALTAMONTE SPRINGS State FL Zip Code 32714
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.142919
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional).....▶	305.00
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 7 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JAMES ARGYRIS		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2014 Transaction ID : SA11AI.142627
Mailing Address 40456 DIANE		Amount of Each Receipt this Period 75.00
City STERLING HEIGHTS	State MI	Zip Code 48313
FEC ID number of contributing federal political committee. C		
Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 365.00	

Full Name (Last, First, Middle Initial) B. JAMES ARGYRIS		Date of Receipt M M / D D / Y Y Y Y Y 11 / 21 / 2014 Transaction ID : SA11AI.142289
Mailing Address 40456 DIANE		Amount of Each Receipt this Period 25.00
City STERLING HEIGHTS	State MI	Zip Code 48313
FEC ID number of contributing federal political committee. C		
Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 390.00	

Full Name (Last, First, Middle Initial) C. ROBERT ARNDT		Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2014 Transaction ID : SA11AI.141972
Mailing Address 2024 MATTHEW DR.		Amount of Each Receipt this Period 30.00
City MONTGOMERY	State IL	Zip Code 60538-4010
FEC ID number of contributing federal political committee. C		
Name of Employer CATERPILLAR INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ROBERT ARNDT
 Full Name (Last, First, Middle Initial)
 Mailing Address 2024 MATTHEW DR.
 City MONTGOMERY State IL Zip Code 60538-4010
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 06 / 2014
Transaction ID : SA11AI.142503
 Amount of Each Receipt this Period
 30.00

B. WILLIAM ATTWOOD
 Full Name (Last, First, Middle Initial)
 Mailing Address 2512 32ND AVENUE
 City ROCK ISLAND State IL Zip Code 61201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.143321
 Amount of Each Receipt this Period
 30.00

C. BRENTON AVERY
 Full Name (Last, First, Middle Initial)
 Mailing Address 17392 WISCONSIN
 City DETROIT State MI Zip Code 48221
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141601
 Amount of Each Receipt this Period
 180.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. BRENTON AVERY		Date of Receipt
Mailing Address 17392 WISCONSIN		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48221
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142306
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="780.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. LAURIE AYRISS		Date of Receipt
Mailing Address 3000 GLENSTONE DR		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
COLUMBIA	TN	38401-5985
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.143238
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="75.00"/>
Name of Employer	Occupation	
SATURN	FACTORY 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) C. LAURIE AYRISS		Date of Receipt
Mailing Address 3000 GLENSTONE DR		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
COLUMBIA	TN	38401-5985
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.143034
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	
SATURN	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="465.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="160.00"/>
TOTAL 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: PAGE 10 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. CHRISTOPHER BAKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2319 PEAR TREE LN
 City ARLINGTON State TX Zip Code 76014-1665
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LEAR CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt 11 / 13 / 2014
Transaction ID : SA11Al.141450
 Amount of Each Receipt this Period 100.00

B. MICHAEL BALLS
 Full Name (Last, First, Middle Initial)
 Mailing Address 20 DELRAY
 City SAGINAW State MI Zip Code 48601
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PACIFIC CENTURY MOTORS INC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 17 / 2014
Transaction ID : SA11Al.141687
 Amount of Each Receipt this Period 75.00

C. JENNY R BARKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 VAN BUREN ST.
 City BELVIDERE State IL Zip Code 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt 10 / 30 / 2014
Transaction ID : SA11Al.141392
 Amount of Each Receipt this Period 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 265.00
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 11 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JENNY R BARKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 821 VAN BUREN ST.
 City State Zip Code
 BELVIDERE IL 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142629
 Amount of Each Receipt this Period
 30.00

B. JERRY BARKER
 Full Name (Last, First, Middle Initial)
 Mailing Address 425 ANDENWOOD DR
 City State Zip Code
 FORT WORTH TX 76140-4101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 BALL CORPORATION FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.142682
 Amount of Each Receipt this Period
 50.00

C. CLINTON BARROW
 Full Name (Last, First, Middle Initial)
 Mailing Address 6089 GRANDVILLE
 City State Zip Code
 DETROIT MI 48228
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141910
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 140.00
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 12 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. CHERIE BARTELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 SUNRISE DR.
 City State Zip Code
 BELVIDERE IL 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.143335
 Amount of Each Receipt this Period
 120.00

B. CHERIE BARTELS
 Full Name (Last, First, Middle Initial)
 Mailing Address 2200 SUNRISE DR.
 City State Zip Code
 BELVIDERE IL 61008
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143093
 Amount of Each Receipt this Period
 40.00

C. FRANCES BATES
 Full Name (Last, First, Middle Initial)
 Mailing Address 20076 MC INTYRE STREET
 City State Zip Code
 DETROIT MI 48219
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143253
 Amount of Each Receipt this Period
 180.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. FRANCES BATES
Full Name (Last, First, Middle Initial)

Mailing Address 20076 MC INTYRE STREET

City State Zip Code
DETROIT MI 48219

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
720.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.143254

Amount of Each Receipt this Period
60.00

B. JEFFERY BECKER
Full Name (Last, First, Middle Initial)

Mailing Address 6794 S IVA RD

City State Zip Code
SAINT CHARLES MI 48655-9755

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
751.50

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SA11AI.142145

Amount of Each Receipt this Period
199.50

C. EDWARD BELL
Full Name (Last, First, Middle Initial)

Mailing Address 1043 ROCKMAN PLACE

City State Zip Code
ROCK HILL MO 63119

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142854

Amount of Each Receipt this Period
26.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.50

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: PAGE 14 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. STEPHANIE BENDER
 Mailing Address 301 H AVE
 City GRUNDY CENTER State IA Zip Code 50638
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.141090
 Amount of Each Receipt this Period
 30.00

Full Name (Last, First, Middle Initial)
B. BRIAN BESS
 Mailing Address 29759 ROAN
 City WARREN State MI Zip Code 48093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 748.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143557
 Amount of Each Receipt this Period
 180.00

Full Name (Last, First, Middle Initial)
C. BRIAN BESS
 Mailing Address 29759 ROAN
 City WARREN State MI Zip Code 48093
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 808.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143558
 Amount of Each Receipt this Period
 60.00

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: PAGE 15 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. DANIEL BILGERE

Mailing Address 1738 STATE ROUTE 303,UNIT 183

City State Zip Code
 STREETSBORO OH 44241

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141616

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. MARY BINGENHEIMER

Mailing Address 3936 CUTTY SARK ROAD

City State Zip Code
 CHERRY VALLEY IL 61016

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.140954

Amount of Each Receipt this Period
 225.00

Full Name (Last, First, Middle Initial)
C. MARY BINGENHEIMER

Mailing Address 3936 CUTTY SARK ROAD

City State Zip Code
 CHERRY VALLEY IL 61016

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 475.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141653

Amount of Each Receipt this Period
 75.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 330.00

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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JIMMY BLEDSOE
Full Name (Last, First, Middle Initial)

Mailing Address 936 BIG HILL ROAD

City MOORESBURG State TN Zip Code 37811

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11Al.143144

Amount of Each Receipt this Period
 300.00

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

Mailing Address 716 N BEECH ST

City FORREST State IL Zip Code 61741-9443

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

Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 05 / 2014
Transaction ID : SA11Al.141634

Amount of Each Receipt this Period
 30.00

C. JOHN BOGUCKI
Full Name (Last, First, Middle Initial)

Mailing Address 716 N BEECH ST

City FORREST State IL Zip Code 61741-9443

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

Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 06 / 2014
Transaction ID : SA11Al.141978

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional).....	360.00
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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOHN BOGUCKI
Full Name (Last, First, Middle Initial)

Mailing Address 716 N BEECH ST

City FORREST State IL Zip Code 61741-9443

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

Name of Employer CATERPILLAR INC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11Al.141805

Amount of Each Receipt this Period
 60.00

B. TONYA BONNER
Full Name (Last, First, Middle Initial)

Mailing Address 4233 CAROL AVENUE

City FORT WORTH State TX Zip Code 76105-4225

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11Al.141961

Amount of Each Receipt this Period
 100.00

C. KENNETH BOUGENO
Full Name (Last, First, Middle Initial)

Mailing Address P.O. BOX 509

City CEDAR HILL State MO Zip Code 63016

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.143208

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 18 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. KENNETH BOUGENO

Mailing Address P.O. BOX 509

City State Zip Code
CEDAR HILL MO 63016

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.143209

Amount of Each Receipt this Period
50.00

Full Name (Last, First, Middle Initial)
B. BARBARA BRADY

Mailing Address P O BOX 541

City State Zip Code
SULLIVAN MO 63080

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141943

Amount of Each Receipt this Period
150.00

Full Name (Last, First, Middle Initial)
C. BARBARA BRADY

Mailing Address P O BOX 541

City State Zip Code
SULLIVAN MO 63080

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.141238

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00

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

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. PAULA J BRENNAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FOX RUN
 City CRANSTON State RI Zip Code 02921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 345.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143246
 Amount of Each Receipt this Period
 25.00

B. PAULA J BRENNAN
 Full Name (Last, First, Middle Initial)
 Mailing Address 62 FOX RUN
 City CRANSTON State RI Zip Code 02921
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 370.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143247
 Amount of Each Receipt this Period
 25.00

C. ISAIAH BROOKS
 Full Name (Last, First, Middle Initial)
 Mailing Address 5067 LINDEN RD,APT 4305
 City ROCKFORD State IL Zip Code 61109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141123
 Amount of Each Receipt this Period
 30.00

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

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

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

FOR LINE NUMBER: PAGE 20 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 30520 QUINKERT ST

City State Zip Code
 ROSEVILLE MI 48066

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 424.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142558

Amount of Each Receipt this Period
 3.00

Full Name (Last, First, Middle Initial)
B. AARON BROWN

Mailing Address 30520 QUINKERT ST

City State Zip Code
 ROSEVILLE MI 48066

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 425.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141677

Amount of Each Receipt this Period
 1.00

Full Name (Last, First, Middle Initial)
C. JAMES BROWN

Mailing Address PO BOX 155

City State Zip Code
 GROVER MO 63040-0155

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

Name of Employer Occupation
 GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.143097

Amount of Each Receipt this Period
 600.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 604.00

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 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. VERNAL BROWN		Date of Receipt
Mailing Address 8417 JACKLIN CT		M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014
City	State	Zip Code
HAZELWOOD	MO	63042
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.141042
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		300.00
Name of Employer	Occupation	
FORD MOTOR COMPANY	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1000.00	

Full Name (Last, First, Middle Initial) B. VERNAL BROWN		Date of Receipt
Mailing Address 8417 JACKLIN CT		M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2014
City	State	Zip Code
HAZELWOOD	MO	63042
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142278
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		100.00
Name of Employer	Occupation	
FORD MOTOR COMPANY	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	1100.00	

Full Name (Last, First, Middle Initial) C. WILLIAM BROWN		Date of Receipt
Mailing Address 5410 NESBITT ST APT 3		M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014
City	State	Zip Code
ELIDA	OH	45807-1853
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142970
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period
		105.00
Name of Employer	Occupation	
FORD MOTOR COMPANY	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	245.00	

SUBTOTAL of Receipts This Page (optional).....▶	505.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WILLIAM BROWN		Date of Receipt M M / D D / Y Y Y Y 11 / 17 / 2014 Transaction ID : SA11AI.143109
Mailing Address 5410 NESBITT ST APT 3		Amount of Each Receipt this Period 35.00
City ELIDA	State OH	Zip Code 45807-1853
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

Full Name (Last, First, Middle Initial) B. LARRY BUCHANAN		Date of Receipt M M / D D / Y Y Y Y 10 / 30 / 2014 Transaction ID : SA11AI.142681
Mailing Address 23038 ELK TRAIL E.		Amount of Each Receipt this Period 25.50
City REDDING	State CA	Zip Code 96003
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
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) C. LARRY BUCHANAN		Date of Receipt M M / D D / Y Y Y Y 11 / 17 / 2014 Transaction ID : SA11AI.140914
Mailing Address 23038 ELK TRAIL E.		Amount of Each Receipt this Period 8.50
City REDDING	State CA	Zip Code 96003
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 308.50	

SUBTOTAL of Receipts This Page (optional).....▶	69.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER: PAGE 23 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ARCHIE BUTTRAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1205 NE 77TH ST.
 City GLADSTONE State MO Zip Code 64118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 670.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142117
 Amount of Each Receipt this Period
 180.00

B. ARCHIE BUTTRAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 1205 NE 77TH ST.
 City GLADSTONE State MO Zip Code 64118
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 730.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142808
 Amount of Each Receipt this Period
 60.00

C. BENJAMIN CAIN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1209 ALICE STREET
 City DAVIS State CA Zip Code 95616
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation CLERICAL WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141221
 Amount of Each Receipt this Period
 142.50

SUBTOTAL of Receipts This Page (optional)..... ▶ 382.50
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 24 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. BENJAMIN CAIN
Full Name (Last, First, Middle Initial)
Mailing Address 1209 ALICE STREET
City DAVIS State CA Zip Code 95616
FEC ID number of contributing federal political committee. **C**
Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **362.50**

Date of Receipt **11 / 17 / 2014**
Transaction ID : SA11Al.141075
Amount of Each Receipt this Period **92.50**

B. DENISE CALDWELL
Full Name (Last, First, Middle Initial)
Mailing Address 19135 ROLANDEALE
City GROSSE POINTE State MI Zip Code 48236
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **720.00**

Date of Receipt **10 / 30 / 2014**
Transaction ID : SA11Al.143300
Amount of Each Receipt this Period **180.00**

C. DENISE CALDWELL
Full Name (Last, First, Middle Initial)
Mailing Address 19135 ROLANDEALE
City GROSSE POINTE State MI Zip Code 48236
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date **780.00**

Date of Receipt **11 / 21 / 2014**
Transaction ID : SA11Al.142902
Amount of Each Receipt this Period **60.00**

SUBTOTAL of Receipts This Page (optional)..... **332.50**
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: PAGE 25 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JUDY CALHOUN			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>21</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.142421			M	M	/	D	D	/	Y	Y	Y	Y	10			21			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
10			21			2014																			
Mailing Address 3101 SEXTON			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>300.00</td> </tr> </table>			300.00																			
300.00																									
City NORMAN	State OK	Zip Code 73026																							
FEC ID number of contributing federal political committee. C																									
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>300.00</td> </tr> </table>				300.00																			
300.00																									

Full Name (Last, First, Middle Initial) B. JUDY CALHOUN			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>29</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.142253			M	M	/	D	D	/	Y	Y	Y	Y	10			29			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
10			29			2014																			
Mailing Address 3101 SEXTON			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>25.00</td> </tr> </table>			25.00																			
25.00																									
City NORMAN	State OK	Zip Code 73026																							
FEC ID number of contributing federal political committee. C																									
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>325.00</td> </tr> </table>				325.00																			
325.00																									

Full Name (Last, First, Middle Initial) C. JUDY CALHOUN			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>30</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.141012			M	M	/	D	D	/	Y	Y	Y	Y	10			30			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
10			30			2014																			
Mailing Address 3101 SEXTON			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td>25.00</td> </tr> </table>			25.00																			
25.00																									
City NORMAN	State OK	Zip Code 73026																							
FEC ID number of contributing federal political committee. C																									
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td>350.00</td> </tr> </table>				350.00																			
350.00																									

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td>350.00</td> </tr> </table>	350.00
350.00		
TOTAL This Period (last page this line number only).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td> </td> </tr> </table>	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. TIMOTHY CAMPBELL		Date of Receipt
Mailing Address 15098 PINEHURST		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48238
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142761
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="105.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="245.00"/>	

Full Name (Last, First, Middle Initial) B. TIMOTHY CAMPBELL		Date of Receipt
Mailing Address 15098 PINEHURST		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48238
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142245
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="35.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="280.00"/>	

Full Name (Last, First, Middle Initial) C. HENRY CAPERS		Date of Receipt
Mailing Address 40218 ALDEN		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
BELLEVILLE	MI	48111
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.141375
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="120.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="660.00"/>	

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="260.00"/>
TOTAL 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 27 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. RANDALL CATRON
Full Name (Last, First, Middle Initial)

Mailing Address 30754 LORRAINE

City WARREN	State MI	Zip Code 48093
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **660.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.140946

Amount of Each Receipt this Period

180.00

B. RANDALL CATRON
Full Name (Last, First, Middle Initial)

Mailing Address 30754 LORRAINE

City WARREN	State MI	Zip Code 48093
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.141832

Amount of Each Receipt this Period

60.00

C. ANTHONY J CAVALLARO
Full Name (Last, First, Middle Initial)

Mailing Address 223 N. GROVE AVE

City FREEPORT	State IL	Zip Code 61032
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141603

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
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 28 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ANTHONY J CAVALLARO
 Full Name (Last, First, Middle Initial)
 Mailing Address 223 N. GROVE AVE
 City FREEPORT State IL Zip Code 61032
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141085
 Amount of Each Receipt this Period
 30.00

B. FREDDIE CHARLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 WATER ST
 City LYONS State MI Zip Code 48851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 245.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142390
 Amount of Each Receipt this Period
 105.00

C. FREDDIE CHARLES
 Full Name (Last, First, Middle Initial)
 Mailing Address 300 WATER ST
 City LYONS State MI Zip Code 48851
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142219
 Amount of Each Receipt this Period
 35.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 4909 N. NEAL RANCH RD.

City KINGMAN	State AZ	Zip Code 86401
-----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.143233

Amount of Each Receipt this Period

200.00

B. RICHARD CHARLESWORTH
Full Name (Last, First, Middle Initial)

Mailing Address 4909 N. NEAL RANCH RD.

City KINGMAN	State AZ	Zip Code 86401
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FEC ID number of contributing federal political committee. **C**

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.143234

Amount of Each Receipt this Period

50.00

C. STACEY CHEEK
Full Name (Last, First, Middle Initial)

Mailing Address 2205 S PERRYVILLE RD,#116

City ROCKFORD	State IL	Zip Code 61108
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141827

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional).....▶	340.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STACEY CHEEK
Full Name (Last, First, Middle Initial)

Mailing Address 2205 S PERRYVILLE RD,#116

City ROCKFORD	State IL	Zip Code 61108
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
11	/	21	/	2014

Transaction ID : SA11AI.141828

Amount of Each Receipt this Period
30.00

B. JAMES CHILDRESS
Full Name (Last, First, Middle Initial)

Mailing Address 2386 HAMILTON RD

City BROOKSVILLE	State KY	Zip Code 41004
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FEC ID number of contributing federal political committee. **C**

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.143436

Amount of Each Receipt this Period
150.00

C. JAMES CHILDRESS
Full Name (Last, First, Middle Initial)

Mailing Address 2386 HAMILTON RD

City BROOKSVILLE	State KY	Zip Code 41004
---------------------	-------------	-------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.143260

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 31 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOHN COWSERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 BELVEDERE DRIVE
 City KOKOMO State IN Zip Code 46902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.142707
 Amount of Each Receipt this Period
 105.00

B. JOHN COWSERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1301 BELVEDERE DRIVE
 City KOKOMO State IN Zip Code 46902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141650
 Amount of Each Receipt this Period
 35.00

C. LLOYD COX
 Full Name (Last, First, Middle Initial)
 Mailing Address 3805 HARROGATE DR.
 City NORMAN State OK Zip Code 73072
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 900.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.143142
 Amount of Each Receipt this Period
 900.00

SUBTOTAL of Receipts This Page (optional).....▶	1040.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ROBIN CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 116 EL PERRO DR
City SAINT PETERS State MO Zip Code 63376-1157
FEC ID number of contributing federal political committee. **C**
Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.143150
Amount of Each Receipt this Period
150.00

B. ROBIN CROUCH
Full Name (Last, First, Middle Initial)
Mailing Address 116 EL PERRO DR
City SAINT PETERS State MO Zip Code 63376-1157
FEC ID number of contributing federal political committee. **C**
Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SA11AI.143278
Amount of Each Receipt this Period
50.00

C. ROBERT CUNNINGHAM
Full Name (Last, First, Middle Initial)
Mailing Address 801 WELLER AVENUE
City HAMILTON State OH Zip Code 45015-1568
FEC ID number of contributing federal political committee. **C**
Name of Employer PHILIP MORRIS Occupation FACTORY 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
10 / 30 / 2014
Transaction ID : SA11AI.140974
Amount of Each Receipt this Period
140.00

SUBTOTAL of Receipts This Page (optional).....▶	340.00
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 33 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ROBERT CUNNINGHAM
 Full Name (Last, First, Middle Initial)
 Mailing Address 801 WELLER AVENUE
 City HAMILTON State OH Zip Code 45015-1568
 FEC ID number of contributing federal political committee. **C**
 Name of Employer PHILIP MORRIS Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142030
 Amount of Each Receipt this Period
 35.00

B. PAMELA DAVIDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1147 DAY STREET
 City GALESBURG State IL Zip Code 61401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142365
 Amount of Each Receipt this Period
 90.00

C. PAMELA DAVIDSON
 Full Name (Last, First, Middle Initial)
 Mailing Address 1147 DAY STREET
 City GALESBURG State IL Zip Code 61401
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.142711
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 155.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 37130 BAKER DRIVE

City WESTLAND State MI Zip Code 48185

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **525.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.143016

Amount of Each Receipt this Period
75.00

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

Mailing Address 37130 BAKER DRIVE

City WESTLAND State MI Zip Code 48185

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **550.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.143017

Amount of Each Receipt this Period
25.00

C. MECHELLE DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 7516 RUTHERFORD

City DETROIT State MI Zip Code 48228

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **336.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.141824

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....▶	150.00
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 35 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MECHELLE DAVIS
Full Name (Last, First, Middle Initial)

Mailing Address 7516 RUTHERFORD

City State Zip Code
DETROIT MI 48228

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
361.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142530

Amount of Each Receipt this Period
25.00

B. LUCAS DESPAIN
Full Name (Last, First, Middle Initial)

Mailing Address 503 N CHURCH ST

City State Zip Code
ALBANY IL 61230

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

Name of Employer Occupation
DEERE & CO FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.143432

Amount of Each Receipt this Period
90.00

C. LUCAS DESPAIN
Full Name (Last, First, Middle Initial)

Mailing Address 503 N CHURCH ST

City State Zip Code
ALBANY IL 61230

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

Name of Employer Occupation
DEERE & CO FACTORY 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
11 / 17 / 2014
Transaction ID : SA11AI.142908

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....	145.00
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 36 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. LORNE T DITTMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1420 CUMBERLAND TRAIL

City PLANO	State TX	Zip Code 75023
---------------	-------------	-------------------

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

Name of Employer CHRYSLER	Occupation FACTORY WORKER
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141690

Amount of Each Receipt this Period

100.00

B. LORNE T DITTMAN
Full Name (Last, First, Middle Initial)

Mailing Address 1420 CUMBERLAND TRAIL

City PLANO	State TX	Zip Code 75023
---------------	-------------	-------------------

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

Name of Employer CHRYSLER	Occupation FACTORY WORKER
------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.141335

Amount of Each Receipt this Period

50.00

C. DEREK DOUGHTY
Full Name (Last, First, Middle Initial)

Mailing Address 130 ROLLING GREEN DR

City AMHERST	State MA	Zip Code 01002-2732
-----------------	-------------	------------------------

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

Name of Employer UNIVERSITY OF MASSACHUSETTS	Occupation CLERICAL 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
11	/	17	/	2014

Transaction ID : SA11AI.142238

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional).....▶	240.00
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 37 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STEVEN DOYE
 Full Name (Last, First, Middle Initial)
 Mailing Address 4729 20TH AVE
 City Moline State IL Zip Code 61265
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.142764
 Amount of Each Receipt this Period
300.00

B. DAVID DUNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1124 N. MARKWELL
 City Oklahoma City State OK Zip Code 73127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143391
 Amount of Each Receipt this Period
150.00

C. DAVID DUNN
 Full Name (Last, First, Middle Initial)
 Mailing Address 1124 N. MARKWELL
 City Oklahoma City State OK Zip Code 73127
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142949
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....	230.00
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 38 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. HARVEY DURHAM
Full Name (Last, First, Middle Initial)

Mailing Address 1276 FIRST AVENUE

City LAWRENCEBURG State TN Zip Code 38464

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

Name of Employer INTERNATIONAL UNION, UAW Occupation INTERNATIONAL REPRESENTATIVE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11AI.143145

Amount of Each Receipt this Period
 300.00

B. KELLY Y DURHAM
Full Name (Last, First, Middle Initial)

Mailing Address 29864 CITY CENTER DR.

City WARREN State MI Zip Code 48093-2431

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142406

Amount of Each Receipt this Period
 120.00

C. KELLY Y DURHAM
Full Name (Last, First, Middle Initial)

Mailing Address 29864 CITY CENTER DR.

City WARREN State MI Zip Code 48093-2431

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 720.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142242

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	480.00
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 39 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOHN ELLINGER, JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11470 KLEBBA
 City TAYLOR State MI Zip Code 48180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141902
 Amount of Each Receipt this Period
 90.00

B. JOHN ELLINGER, JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 11470 KLEBBA
 City TAYLOR State MI Zip Code 48180
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141903
 Amount of Each Receipt this Period
 30.00

C. LONNIE FARWELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 1503 20TH AVE
 City VIOLA State IL Zip Code 61486
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142747
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 40 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. LONNIE FARWELL			Date of Receipt
Mailing Address 1503 20TH AVE			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142578
VIOLA	IL	61486	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="30.00"/>
Name of Employer	Occupation		
DEERE & CO	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. KEVIN FEIRER			Date of Receipt
Mailing Address 33923 FRASER AVE			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.143248
FRASER	MI	48026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="180.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. KEVIN FEIRER			Date of Receipt
Mailing Address 33923 FRASER AVE			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.143357
FRASER	MI	48026	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			<input type="text" value="60.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="780.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL 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 41 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. TONI FERRO
Full Name (Last, First, Middle Initial)

Mailing Address 1711 25TH AVE #4

City SEATTLE State WA Zip Code 98122

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

Name of Employer WASHINGTON (UNIVERSITY OF) Occupation CLERICAL WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 245.00

Date of Receipt
11 / 20 / 2014
Transaction ID : SA11AI.141791

Amount of Each Receipt this Period
35.00

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

Mailing Address 21067 WOODLAND DR.

City MACOMB TWP. State MI Zip Code 48044

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
10 / 30 / 2014
Transaction ID : SA11AI.142726

Amount of Each Receipt this Period
75.00

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

Mailing Address 21067 WOODLAND DR.

City MACOMB TWP. State MI Zip Code 48044

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 425.00

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11AI.141311

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶ 135.00

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 42 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. KAREN FLEER
Full Name (Last, First, Middle Initial)

Mailing Address 1003 BRUSH CREEK ROAD

City ST CLAIR	State MO	Zip Code 63077-2608
------------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142520

Amount of Each Receipt this Period

150.00

B. KAREN FLEER
Full Name (Last, First, Middle Initial)

Mailing Address 1003 BRUSH CREEK ROAD

City ST CLAIR	State MO	Zip Code 63077-2608
------------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.142349

Amount of Each Receipt this Period

50.00

C. MATTHEW FRANTZEN
Full Name (Last, First, Middle Initial)

Mailing Address 8707 CENTAUR DR

City BELVIDERE	State IL	Zip Code 61008
-------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142533

Amount of Each Receipt this Period

90.00

SUBTOTAL of Receipts This Page (optional).....▶	290.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MATTHEW FRANTZEN
Full Name (Last, First, Middle Initial)

Mailing Address 8707 CENTAUR DR

City BELVIDERE State IL Zip Code 61008

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141826

Amount of Each Receipt this Period
 30.00

B. RICHARD FUGATE
Full Name (Last, First, Middle Initial)

Mailing Address 2284 CAPROCK AVE

City KINGMAN State AZ Zip Code 86401

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142046

Amount of Each Receipt this Period
 150.00

C. JEFFREY GANDER
Full Name (Last, First, Middle Initial)

Mailing Address 4623 ARVADA

City LOVES PARK State IL Zip Code 61111

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142703

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES L GATLIN
Full Name (Last, First, Middle Initial)

Mailing Address 924 CR 2644

City DECATUR State TX Zip Code 76234

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 325.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142131

Amount of Each Receipt this Period
 110.00

B. JAMES L GATLIN
Full Name (Last, First, Middle Initial)

Mailing Address 924 CR 2644

City DECATUR State TX Zip Code 76234

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142305

Amount of Each Receipt this Period
 55.00

C. JOHN R GEDNEY
Full Name (Last, First, Middle Initial)

Mailing Address 4669 PRAIRIE ROSE RD.

City ROSCOE State IL Zip Code 61073

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142376

Amount of Each Receipt this Period
 120.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 285.00

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 45 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. RONALD GETTELFINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4603 CROSSFIELD CIRCLE
 City LOUISVILLE State KY Zip Code 40241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation RETIRED
 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
 10 / 30 / 2014
Transaction ID : SA11AI.142175
 Amount of Each Receipt this Period
 90.00

B. RONALD GETTELFINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 4603 CROSSFIELD CIRCLE
 City LOUISVILLE State KY Zip Code 40241
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation RETIRED
 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
 11 / 17 / 2014
Transaction ID : SA11AI.141804
 Amount of Each Receipt this Period
 30.00

C. ANTONIO GISBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1736 GRAND AVE,UNIT B
 City SAN DIEGO State CA Zip Code 92109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142089
 Amount of Each Receipt this Period
 150.00

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 46 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ANTONIO GIBBERT
 Full Name (Last, First, Middle Initial)
 Mailing Address 1736 GRAND AVE,UNIT B
 City SAN DIEGO State CA Zip Code 92109
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.141737
 Amount of Each Receipt this Period
100.00

B. LARRY GLOTZBACH
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 WHIPPOORWILL HTS
 City NEW ALBANY State IN Zip Code 47150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **350.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141446
 Amount of Each Receipt this Period
150.00

C. LARRY GLOTZBACH
 Full Name (Last, First, Middle Initial)
 Mailing Address 302 WHIPPOORWILL HTS
 City NEW ALBANY State IN Zip Code 47150
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify)
 Aggregate Year-to-Date **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.142501
 Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional).....	300.00
TOTAL This Period (last page this line number only).....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STEPHEN GOODNER
Full Name (Last, First, Middle Initial)

Mailing Address 8356 NW 28TH STREET

City ANKENY State IA Zip Code 50023

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141143

Amount of Each Receipt this Period
 120.00

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

Mailing Address 8356 NW 28TH STREET

City ANKENY State IA Zip Code 50023

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.141322

Amount of Each Receipt this Period
 40.00

C. SCOTT GRAFF
Full Name (Last, First, Middle Initial)

Mailing Address 2230 SE 34TH AVE.

City PORTLAND State OR Zip Code 97214

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141237

Amount of Each Receipt this Period
 100.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 260.00

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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SCOTT GRAFF
Full Name (Last, First, Middle Initial)

Mailing Address 2230 SE 34TH AVE.

City PORTLAND State OR Zip Code 97214

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.141600

Amount of Each Receipt this Period
50.00

B. TODD GRANDBERRY
Full Name (Last, First, Middle Initial)

Mailing Address 854 MENOMINEE

City PONTIAC State MI Zip Code 48341

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1208.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.141946

Amount of Each Receipt this Period
297.00

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

Mailing Address 854 MENOMINEE

City PONTIAC State MI Zip Code 48341

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1307.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.141947

Amount of Each Receipt this Period
99.00

SUBTOTAL of Receipts This Page (optional)..... **446.00**

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 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. BLAIR GRANT		Date of Receipt
Mailing Address 14165 EASTBURN		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48205
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.142113
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="180.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="540.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. BLAIR GRANT		Date of Receipt
Mailing Address 14165 EASTBURN		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48205
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.141398
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="600.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. ROYAL GRANT		Date of Receipt
Mailing Address 4700 PUMPKIN VINE DR		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
KOKOMO	IN	46902
FEC ID number of contributing federal political committee.		Transaction ID : SA11AI.143178
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="90.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="330.00"/>
TOTAL 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: PAGE 50 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. ROYAL GRANT
 Mailing Address 4700 PUMPKIN VINE DR
 City State Zip Code
 KOKOMO IN 46902
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.143117
 Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. TERI GRAVES
 Mailing Address 2628 COLLEGE AVENUE
 City State Zip Code
 DAVENPORT IA 52803
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 DEERE & CO FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141586
 Amount of Each Receipt this Period
 90.00

Full Name (Last, First, Middle Initial)
C. DAVID GRAY
 Mailing Address 87 JULIE LN
 City State Zip Code
 ST PETERS MO 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FORD MOTOR COMPANY FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141984
 Amount of Each Receipt this Period
 150.00

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 51 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DAVID GRAY		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2014 Transaction ID : SA11AI.142181
Mailing Address 87 JULIE LN		Amount of Each Receipt this Period 50.00
City ST PETERS	State MO	Zip Code 63376
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 650.00	

Full Name (Last, First, Middle Initial) B. JERRY GRAY		Date of Receipt M M / D D / Y Y Y Y Y 10 / 30 / 2014 Transaction ID : SA11AI.143487
Mailing Address PO BOX 723		Amount of Each Receipt this Period 450.00
City SCOTTSVILLE	State TX	Zip Code 75688-0723
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1525.00	

Full Name (Last, First, Middle Initial) C. JERRY GRAY		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2014 Transaction ID : SA11AI.143110
Mailing Address PO BOX 723		Amount of Each Receipt this Period 150.00
City SCOTTSVILLE	State TX	Zip Code 75688-0723
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1675.00	

SUBTOTAL of Receipts This Page (optional).....▶	650.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. MELVIN GRAY		Date of Receipt
Mailing Address 5433 GERALDINE AVE		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ST LOUIS	MO	63115
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142712
Name of Employer	Occupation	Amount of Each Receipt this Period
	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. RANDALL G GREEN JR		Date of Receipt
Mailing Address 413 BROADWAY STREET		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARINE CITY	MI	48039
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.143052
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="60.00"/>
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) C. RANDALL G GREEN JR		Date of Receipt
Mailing Address 413 BROADWAY STREET		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARINE CITY	MI	48039
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.143180
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="60.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="420.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 3172 N 300TH AVE

City ALPHA State IL Zip Code 61413

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143068

Amount of Each Receipt this Period
 90.00

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

Mailing Address 3172 N 300TH AVE

City ALPHA State IL Zip Code 61413

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.143319

Amount of Each Receipt this Period
 30.00

C. AMANDA GURLEY
Full Name (Last, First, Middle Initial)

Mailing Address 737 N CAROLINA AVE

City DECATUR State IL Zip Code 62522-1209

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

Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 05 / 2014
Transaction ID : SA11AI.141442

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. AMANDA GURLEY
Full Name (Last, First, Middle Initial)

Mailing Address 737 N CAROLINA AVE

City DECATUR State IL Zip Code 62522-1209

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

Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 06 / 2014
Transaction ID : SA11AI.142160

Amount of Each Receipt this Period
 30.00

B. AMANDA GURLEY
Full Name (Last, First, Middle Initial)

Mailing Address 737 N CAROLINA AVE

City DECATUR State IL Zip Code 62522-1209

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

Name of Employer CATERPILLAR INC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.141794

Amount of Each Receipt this Period
 60.00

C. JOHN GUST
Full Name (Last, First, Middle Initial)

Mailing Address 3419 CEDAR

City RIVERSIDE State CA Zip Code 92507

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

Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL 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
 11 / 17 / 2014
Transaction ID : SA11AI.142188

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....	240.00
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 55 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 1483 N COUNTY ROAD 1150 W

City KOKOMO	State IN	Zip Code 46901-8673
----------------	-------------	------------------------

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

Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER
--------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11AI.143322

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)
B. TRISHIA HAMDORF

Mailing Address PO BOX 512

City ERIE	State IL	Zip Code 61250
--------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY WORKER
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141472

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)
C. TRISHIA HAMDORF

Mailing Address PO BOX 512

City ERIE	State IL	Zip Code 61250
--------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY 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
11	/	17	/	2014

Transaction ID : SA11AI.141301

Amount of Each Receipt this Period

30.00

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 56 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. LAWRENCE HAMILTON JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 WEST SHORE DRIVE
 City State Zip Code
 CAMPBELLSVILL KY 42718-9304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GENERAL MOTORS CORPORATION FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 755.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141081
 Amount of Each Receipt this Period
 30.00

B. LAWRENCE HAMILTON JR
 Full Name (Last, First, Middle Initial)
 Mailing Address 200 WEST SHORE DRIVE
 City State Zip Code
 CAMPBELLSVILL KY 42718-9304
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GENERAL MOTORS CORPORATION FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 765.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.141231
 Amount of Each Receipt this Period
 10.00

C. MELVIN HANSENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10095 COPPER TR SW
 City State Zip Code
 FIFE LAKE MI 49633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GENERAL MOTORS CORPORATION FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141744
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00
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 57 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MELVIN HANSENS
 Full Name (Last, First, Middle Initial)
 Mailing Address 10095 COPPER TR SW
 City State Zip Code
 FIFE LAKE MI 49633
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 GENERAL MOTORS CORPORATION FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.141384
 Amount of Each Receipt this Period
 300.00

B. VALERIE HANSERD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 VICTORIA AVENUE
 City State Zip Code
 ROCKFORD IL 61102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 630.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142077
 Amount of Each Receipt this Period
 135.00

C. VALERIE HANSERD
 Full Name (Last, First, Middle Initial)
 Mailing Address 1501 VICTORIA AVENUE
 City State Zip Code
 ROCKFORD IL 61102
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 655.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142265
 Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ► 190.00
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 58 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. VAUGHN HARBIN
Full Name (Last, First, Middle Initial)

Mailing Address 2088 PLUM RUN ROAD

City BARDSTOWN State KY Zip Code 40004

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142189

Amount of Each Receipt this Period
 90.00

B. VAUGHN HARBIN
Full Name (Last, First, Middle Initial)

Mailing Address 2088 PLUM RUN ROAD

City BARDSTOWN State KY Zip Code 40004

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.142006

Amount of Each Receipt this Period
 30.00

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

Mailing Address 7411 Palo Verde Rd

City Irvine State CA Zip Code 92617

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

Name of Employer UNIVERSITY OF CALIFORNIA Occupation CLERICAL WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 20 / 2014
Transaction ID : SA11AI.142167

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 59 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JEREMY HARPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 50489 PLAZA DR.
 City State Zip Code
 MACOMB MI 48042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141694
 Amount of Each Receipt this Period
 130.00

B. JEREMY HARPER
 Full Name (Last, First, Middle Initial)
 Mailing Address 50489 PLAZA DR.
 City State Zip Code
 MACOMB MI 48042
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 330.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.142574
 Amount of Each Receipt this Period
 60.00

C. DOROTHY HARRIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 7865 NW ROANRIDGE ROAD,APT D
 City State Zip Code
 KANSAS CITY MO 64151
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FORD MOTOR COMPANY FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.142639
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 340.00
TOTAL This Period (last page this line number only)..... ▶

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. DOROTHY HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 7865 NW ROANRIDGE ROAD,APT D

City KANSAS CITY State MO Zip Code 64151

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
11 / 17 / 2014

Transaction ID : SA11Al.142809

Amount of Each Receipt this Period
50.00

B. RUSSELL J HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 519 E PERRY STREET

City BELVIDERE State IL Zip Code 61008

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
10 / 30 / 2014

Transaction ID : SA11Al.141391

Amount of Each Receipt this Period
90.00

C. RUSSELL J HARRIS
Full Name (Last, First, Middle Initial)

Mailing Address 519 E PERRY STREET

City BELVIDERE State IL Zip Code 61008

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
11 / 21 / 2014

Transaction ID : SA11Al.141567

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **170.00**

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 61 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STACY HAWKINS
Full Name (Last, First, Middle Initial)

Mailing Address 19335 FIELDING ST

City DETROIT	State MI	Zip Code 48219-2528
-----------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.143422

Amount of Each Receipt this Period

180.00

B. STACY HAWKINS
Full Name (Last, First, Middle Initial)

Mailing Address 19335 FIELDING ST

City DETROIT	State MI	Zip Code 48219-2528
-----------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.143423

Amount of Each Receipt this Period

60.00

C. LINDA HAYES
Full Name (Last, First, Middle Initial)

Mailing Address 21801 PARKLAWN

City OAK PARK	State MI	Zip Code 48237
------------------	-------------	-------------------

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

Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **816.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.143468

Amount of Each Receipt this Period

204.00

SUBTOTAL of Receipts This Page (optional).....▶	444.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. LINDA HAYES
Full Name (Last, First, Middle Initial)

Mailing Address 21801 PARKLAWN

City OAK PARK State MI Zip Code 48237

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **884.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014

Transaction ID : SA11AI.142890

Amount of Each Receipt this Period
68.00

B. LINDA HEBERLIE
Full Name (Last, First, Middle Initial)

Mailing Address 606 WINDFIELD LANE

City MACHESNEY PARK State IL Zip Code 61115

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.140985

Amount of Each Receipt this Period
90.00

C. LINDA HEBERLIE
Full Name (Last, First, Middle Initial)

Mailing Address 606 WINDFIELD LANE

City MACHESNEY PARK State IL Zip Code 61115

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
11 / 21 / 2014

Transaction ID : SA11AI.141336

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... **188.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. KEITH HELMS
Full Name (Last, First, Middle Initial)

Mailing Address 2640 SPRINGDALE DRIVE

City ROCKFORD	State IL	Zip Code 61114
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.140986

Amount of Each Receipt this Period
90.00

B. KEITH HELMS
Full Name (Last, First, Middle Initial)

Mailing Address 2640 SPRINGDALE DRIVE

City ROCKFORD	State IL	Zip Code 61114
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
11	/	21	/	2014

Transaction ID : SA11AI.141864

Amount of Each Receipt this Period
30.00

C. RONALD HENDRIX
Full Name (Last, First, Middle Initial)

Mailing Address 1022 JUSTUS DRIVE

City JOHNSON CITY	State TN	Zip Code 37604
----------------------	-------------	-------------------

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

Name of Employer REXROTH CORP.	Occupation FACTORY WORKER
-----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2014

Transaction ID : SA11AI.141681

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 64 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. KARL HOFFREY
Full Name (Last, First, Middle Initial)

Mailing Address 6543 25TH AVE NE

City SEATTLE	State WA	Zip Code 98115
-----------------	-------------	-------------------

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

Name of Employer CALIFORNIA (UNIVERSITY OF)	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **315.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142401

Amount of Each Receipt this Period

165.00

B. KARL HOFFREY
Full Name (Last, First, Middle Initial)

Mailing Address 6543 25TH AVE NE

City SEATTLE	State WA	Zip Code 98115
-----------------	-------------	-------------------

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

Name of Employer CALIFORNIA (UNIVERSITY OF)	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **422.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.140994

Amount of Each Receipt this Period

107.50

C. CYNTHIA HOLLAND
Full Name (Last, First, Middle Initial)

Mailing Address 2824 GOLFING GREEN DR.

City FARMERS BRANCH	State TX	Zip Code 75234
------------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142756

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....▶	372.50
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 65 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. CYNTHIA HOLLAND
Full Name (Last, First, Middle Initial)

Mailing Address 2824 GOLFING GREEN DR.

City FARMERS BRANCH State TX Zip Code 75234

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.141175

Amount of Each Receipt this Period
 50.00

B. RANDY HOLT
Full Name (Last, First, Middle Initial)

Mailing Address 505 S MADISON ST

City PRAIRIE CITY State IA Zip Code 50228

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141471

Amount of Each Receipt this Period
 90.00

C. RANDY HOLT
Full Name (Last, First, Middle Initial)

Mailing Address 505 S MADISON ST

City PRAIRIE CITY State IA Zip Code 50228

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11Al.142539

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 66 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WILLIE HOPSON		Date of Receipt
Mailing Address 1405 RURAL AVE,#2		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCKFORD	IL	61107
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142728
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="90.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. WILLIE HOPSON		Date of Receipt
Mailing Address 1405 RURAL AVE,#2		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCKFORD	IL	61107
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.141495
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. HORACE HUBBARD JR		Date of Receipt
Mailing Address 1807 VERMONT ST		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROCKFORD	IL	61101
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.141215
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="90.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. HORACE HUBBARD JR
Full Name (Last, First, Middle Initial)

Mailing Address 1807 VERMONT ST

City ROCKFORD State IL Zip Code 61101

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142106

Amount of Each Receipt this Period
 30.00

B. WILLIAM HUGEBACK II
Full Name (Last, First, Middle Initial)

Mailing Address 130 OAKWOOD LN

City O FALLON State MO Zip Code 63366-1433

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

Name of Employer ENSIGN-BICKFORD INDUSTRIES INC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141790

Amount of Each Receipt this Period
 50.00

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

Mailing Address UAW LOCAL 2250
1395 E. PIERCE BLVD.

City WENTZVILLE State MO Zip Code 63385

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141539

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 68 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address UAW LOCAL 2250
 1395 E. PIERCE BLVD.

City WENTZVILLE State MO Zip Code 63385

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.141009

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. THOMAS HURST

Mailing Address 220 E. SUMMIT ST.

City BRECKENRIDGE State MI Zip Code 48615

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

Name of Employer PACIFIC CENTURY MOTORS INC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.141129

Amount of Each Receipt this Period
 150.00

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

Mailing Address 3647 FARWELL BRIDGE RD.

City ROCK CITY State IL Zip Code 61070

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11Al.142979

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 69 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JUSTIN JAKES			Date of Receipt
Mailing Address 1301 ORLEANS APT 601E			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.142102
DETROIT	MI	48207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="180.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. JUSTIN JAKES			Date of Receipt
Mailing Address 1301 ORLEANS APT 601E			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.141749
DETROIT	MI	48207	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="780.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. MATTHEW JAKUBOWICZ			Date of Receipt
Mailing Address 544 15TH AVE			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.142115
EAST MOLINE	IL	61244	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		
DEERE & CO	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 48560 BAY HARBOR DRIVE

City MACOMB State MI Zip Code 48044

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1102.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141904

Amount of Each Receipt this Period
 180.00

B. JEFFREY JAREMA
Full Name (Last, First, Middle Initial)

Mailing Address 48560 BAY HARBOR DRIVE

City MACOMB State MI Zip Code 48044

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1162.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142263

Amount of Each Receipt this Period
 60.00

C. CAROL JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 132 VINCENT ST

City PACIFIC State MO Zip Code 63069-1256

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141986

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 390.00

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 71 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 132 VINCENT ST

City PACIFIC State MO Zip Code 63069-1256

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.142348

Amount of Each Receipt this Period
50.00

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

Mailing Address 706 CASSEYVILLE ROAD

City COLLINSVILLE State IL Zip Code 62234

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.141086

Amount of Each Receipt this Period
25.00

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

Mailing Address 706 CASSEYVILLE ROAD

City COLLINSVILLE State IL Zip Code 62234

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
11 / 21 / 2014

Transaction ID : SA11AI.142119

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional).....▶	100.00
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 72 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DOROTHY JOHNSON		Date of Receipt
Mailing Address 827 DANIEL DRIVE		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
MARYVILLE	IL	62062
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142580
Name of Employer	Occupation	Amount of Each Receipt this Period
	RETIRED	<input type="text" value="300.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>	

Full Name (Last, First, Middle Initial) B. NORAH JOHNSON		Date of Receipt
Mailing Address 2505 TAFT AVE SW		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
WYOMING	MI	49519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142793
Name of Employer	Occupation	Amount of Each Receipt this Period
GENERAL MOTORS CORPORATION	FACTORY WORKER	<input type="text" value="90.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) C. NORAH JOHNSON		Date of Receipt
Mailing Address 2505 TAFT AVE SW		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
WYOMING	MI	49519
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142100
Name of Employer	Occupation	Amount of Each Receipt this Period
GENERAL MOTORS CORPORATION	FACTORY WORKER	<input type="text" value="30.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="240.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="420.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 5034 W OUTER DR

City	State	Zip Code
DETROIT	MI	48235

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

Name of Employer	Occupation
CHRYSLER LLC	FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **540.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142575

Amount of Each Receipt this Period

180.00

B. STACY JOHNSON
Full Name (Last, First, Middle Initial)

Mailing Address 5034 W OUTER DR

City	State	Zip Code
DETROIT	MI	48235

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

Name of Employer	Occupation
CHRYSLER LLC	FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.141697

Amount of Each Receipt this Period

60.00

C. KEITH JONES
Full Name (Last, First, Middle Initial)

Mailing Address 22711 SOCIA ST.

City	State	Zip Code
ST CLAIR SHORES	MI	48082

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

Name of Employer	Occupation
CHRYSLER LLC	FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142778

Amount of Each Receipt this Period

75.00

SUBTOTAL of Receipts This Page (optional).....▶	315.00
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 74 OF 183
(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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. KEITH JONES
Full Name (Last, First, Middle Initial)
Mailing Address 22711 SOCIA ST.
City ST CLAIR SHORES State MI Zip Code 48082
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 420.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142264
Amount of Each Receipt this Period
25.00

B. SCOTT A JONES
Full Name (Last, First, Middle Initial)
Mailing Address 815 BECKY CT
City BELVIDERE State IL Zip Code 61008
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY 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
10 / 30 / 2014
Transaction ID : SA11AI.141568
Amount of Each Receipt this Period
90.00

C. SCOTT A JONES
Full Name (Last, First, Middle Initial)
Mailing Address 815 BECKY CT
City BELVIDERE State IL Zip Code 61008
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY 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
11 / 21 / 2014
Transaction ID : SA11AI.141393
Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 145.00
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 75 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. TAMMY JONES

Mailing Address 21520 DEQUINDRE RD

City State Zip Code
 WARREN MI 48091-2255

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

Name of Employer Occupation
 AMERICAN AXLE & MANUFACTURING FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 829.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142826

Amount of Each Receipt this Period
 99.99

Full Name (Last, First, Middle Initial)
B. KEN JORDAN

Mailing Address BOX 6197

City State Zip Code
 FORT WORTH TX 76115-0197

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

Name of Employer Occupation
 REYNOLDS METAL FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.143404

Amount of Each Receipt this Period
 600.00

Full Name (Last, First, Middle Initial)
C. TRACY JORDAN

Mailing Address 407 LINDEN AVE.

City State Zip Code
 SUFFOLK VA 23434

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

Name of Employer Occupation
 KRAFT FOODS, INC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 272.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.141699

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ **749.99**

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 76 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. TRACY JORDAN
Full Name (Last, First, Middle Initial)

Mailing Address 407 LINDEN AVE.

City State Zip Code
SUFFOLK VA 23434

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

Name of Employer Occupation
KRAFT FOODS, INC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
303.75

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 11 / 2014
Transaction ID : SA11AI.142749

Amount of Each Receipt this Period
31.25

B. RICHARD KAISER
Full Name (Last, First, Middle Initial)

Mailing Address 29415 CUNNINGHAM DR

City State Zip Code
WARREN MI 48092-2254

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
770.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141242

Amount of Each Receipt this Period
180.00

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

Mailing Address 29415 CUNNINGHAM DR

City State Zip Code
WARREN MI 48092-2254

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
830.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142651

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 271.25

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 77 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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

NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. LOUIS KARAYANESJR
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 LINCOLN
 City MOUNT CLEMENS State MI Zip Code 48043-5536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143273
 Amount of Each Receipt this Period
 120.00

B. LOUIS KARAYANESJR
 Full Name (Last, First, Middle Initial)
 Mailing Address 42 LINCOLN
 City MOUNT CLEMENS State MI Zip Code 48043-5536
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143072
 Amount of Each Receipt this Period
 40.00

C. JAMESSELL KEE
 Full Name (Last, First, Middle Initial)
 Mailing Address 404 LONE OAK DRIVE
 City ROCK HILL State MO Zip Code 63119-1322
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142440
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 310.00
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 78 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMESSELL KEE
Full Name (Last, First, Middle Initial)

Mailing Address 404 LONE OAK DRIVE

City State Zip Code
ROCK HILL MO 63119-1322

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

Name of Employer Occupation
RETIRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
650.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.141381

Amount of Each Receipt this Period
50.00

B. DENISE KIDD
Full Name (Last, First, Middle Initial)

Mailing Address 7702 E JEFFERSON AVE APT 203

City State Zip Code
DETROIT MI 48214-2549

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

Name of Employer Occupation
CHRYSLER FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.142727

Amount of Each Receipt this Period
90.00

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

Mailing Address 8043 BLISS

City State Zip Code
DETROIT MI 48234

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
879.96

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.142615

Amount of Each Receipt this Period
299.97

SUBTOTAL of Receipts This Page (optional).....▶	439.97
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 8043 BLISS

City State Zip Code
DETROIT MI 48234

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
979.95

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142432

Amount of Each Receipt this Period
99.99

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

Mailing Address 3627 EAST MEADOWS CT

City State Zip Code
OKEMOS MI 48864

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
640.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.142527

Amount of Each Receipt this Period
120.00

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

Mailing Address 3627 EAST MEADOWS CT

City State Zip Code
OKEMOS MI 48864

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
700.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.141282

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional).....▶	279.99
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 80 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. LARRY KOHENSKEY

Mailing Address 18 FIRELY

City TROY State MO Zip Code 63379

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

Name of Employer Occupation
 RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11Al.141783

Amount of Each Receipt this Period
 300.00

Full Name (Last, First, Middle Initial)
B. RICKY KRZESKINSKI

Mailing Address 522 CANTERBURY DR.

City SALINE State MI Zip Code 48176

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

Name of Employer Occupation
 PLASTIC OMNIMUM FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 319.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141515

Amount of Each Receipt this Period
 75.00

Full Name (Last, First, Middle Initial)
C. RICKY KRZESKINSKI

Mailing Address 522 CANTERBURY DR.

City SALINE State MI Zip Code 48176

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

Name of Employer Occupation
 PLASTIC OMNIMUM FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 344.26

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11Al.142400

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 400.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 81 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. GARY KUGLER		Date of Receipt
Mailing Address 10968,DUBLIN		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City ROSCOE	State IL	Zip Code 61073
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.142980
Name of Employer CHRYSLER LLC		Amount of Each Receipt this Period
Occupation FACTORY WORKER		<input type="text" value="150.00"/>
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"/>		

Full Name (Last, First, Middle Initial) B. MARK KUNDRICK		Date of Receipt
Mailing Address 2060 DUNWOODIE ST		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City ORTONVILLE	State MI	Zip Code 48462-8556
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.143454
Name of Employer GENERAL MOTORS CORPORATION		Amount of Each Receipt this Period
Occupation FACTORY WORKER		<input type="text" value="180.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="660.00"/>		

Full Name (Last, First, Middle Initial) C. MARK KUNDRICK		Date of Receipt
Mailing Address 2060 DUNWOODIE ST		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City ORTONVILLE	State MI	Zip Code 48462-8556
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11Al.143275
Name of Employer GENERAL MOTORS CORPORATION		Amount of Each Receipt this Period
Occupation FACTORY WORKER		<input type="text" value="60.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="720.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="390.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 82 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ANGELA S LAMPE-MAPEL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 391
 City MONROE State WI Zip Code 53566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.143509
 Amount of Each Receipt this Period
 90.00

B. ANGELA S LAMPE-MAPEL
 Full Name (Last, First, Middle Initial)
 Mailing Address P.O. BOX 391
 City MONROE State WI Zip Code 53566
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142998
 Amount of Each Receipt this Period
 30.00

C. JAMES LANE
 Full Name (Last, First, Middle Initial)
 Mailing Address 135 BRYNES DR
 City WATERLOO State IA Zip Code 50701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.141200
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 83 OF 183
(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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES LANE
Full Name (Last, First, Middle Initial)

Mailing Address 135 BRYNES DR

City WATERLOO State IA Zip Code 50701

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11Al.141736

Amount of Each Receipt this Period
 30.00

B. CHARLES LARSON
Full Name (Last, First, Middle Initial)

Mailing Address 1715 DOWNING AVE

City WATERLOO State IA Zip Code 50701-6020

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

Name of Employer DEERE & CO Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11Al.141219

Amount of Each Receipt this Period
 90.00

C. CHARLES LARSON
Full Name (Last, First, Middle Initial)

Mailing Address 1715 DOWNING AVE

City WATERLOO State IA Zip Code 50701-6020

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11Al.142456

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 150.00

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 84 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MONTRICE LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 38469 SHELBY DRIVE
 City WESTLAND State MI Zip Code 48186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.142920
 Amount of Each Receipt this Period
 90.00

B. MONTRICE LEWIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 38469 SHELBY DRIVE
 City WESTLAND State MI Zip Code 48186
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142997
 Amount of Each Receipt this Period
 30.00

C. VINCENT LIND
 Full Name (Last, First, Middle Initial)
 Mailing Address 8115 7TH ST W
 City ROCK ISLAND State IL Zip Code 61201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.140956
 Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00
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 85 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. VINCENT LIND
Full Name (Last, First, Middle Initial)

Mailing Address 8115 7TH ST W

City State Zip Code
ROCK ISLAND IL 61201

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

Name of Employer Occupation
DEERE & CO FACTORY 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
11 / 17 / 2014
Transaction ID : SA11AI.141128

Amount of Each Receipt this Period
30.00

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

Mailing Address 215 30TH AVE

City State Zip Code
EAST MOLINE IL 61244

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

Name of Employer Occupation
DEERE & CO FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141300

Amount of Each Receipt this Period
90.00

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

Mailing Address 6238 UPPER RIDGE WAY

City State Zip Code
ROSCOE IL 61073

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
570.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141157

Amount of Each Receipt this Period
57.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 177.00

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 86 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. KEVIN LOGAN
Full Name (Last, First, Middle Initial)

Mailing Address 6238 UPPER RIDGE WAY

City ROSCOE State IL Zip Code 61073

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **627.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11Al.141691

Amount of Each Receipt this Period **57.00**

B. DAN LOUIS
Full Name (Last, First, Middle Initial)

Mailing Address 22168 FREE CHURCH RD

City SOUTH BELOIT State IL Zip Code 61080

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 30 / 2014**

Transaction ID : SA11Al.141879

Amount of Each Receipt this Period **90.00**

C. DAN LOUIS
Full Name (Last, First, Middle Initial)

Mailing Address 22168 FREE CHURCH RD

City SOUTH BELOIT State IL Zip Code 61080

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt **11 / 21 / 2014**

Transaction ID : SA11Al.141880

Amount of Each Receipt this Period **30.00**

SUBTOTAL of Receipts This Page (optional)..... **177.00**

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 87 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. FRANCIS LUBINSKI
Full Name (Last, First, Middle Initial)

Mailing Address 6302 W NORTH AVE

City WAUWATOSA State WI Zip Code 53213

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
11 / 21 / 2014

Transaction ID : SA11AI.143438

Amount of Each Receipt this Period
30.00

B. DANIEL MANUEL
Full Name (Last, First, Middle Initial)

Mailing Address 1430 LOGAN AVE NO

City MINNEAPOLIS State MN Zip Code 55411

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
11 / 21 / 2014

Transaction ID : SA11AI.141566

Amount of Each Receipt this Period
30.00

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

Mailing Address 13217 BOCA GRANDE

City STERLING HGTS State MI Zip Code 48312

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **473.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.141387

Amount of Each Receipt this Period
86.00

SUBTOTAL of Receipts This Page (optional).....▶	146.00
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 88 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. FRANK MANZO
Full Name (Last, First, Middle Initial)

Mailing Address 13217 BOCA GRANDE

City State Zip Code
STERLING HGTS MI 48312

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
516.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.141388

Amount of Each Receipt this Period
43.00

B. STANLEY MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 11205 WASHBURN ROAD

City State Zip Code
OTISVILLE MI 48463-9731

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
319.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141921

Amount of Each Receipt this Period
27.00

C. STANLEY MARSHALL
Full Name (Last, First, Middle Initial)

Mailing Address 11205 WASHBURN ROAD

City State Zip Code
OTISVILLE MI 48463-9731

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
328.00

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SA11AI.142282

Amount of Each Receipt this Period
9.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 79.00

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 89 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. YOLANDA MARTIN			Date of Receipt
Mailing Address 19049 DIJON			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142357
EASTPOINTE	MI	48021-2014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="75.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="380.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. YOLANDA MARTIN			Date of Receipt
Mailing Address 19049 DIJON			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.141821
EASTPOINTE	MI	48021-2014	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="385.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JOSEPH MASSAQUOI, JR.			Date of Receipt
Mailing Address 1256 W MULLEN AVE			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.143320
WATERLOO	IA	50701	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="150.00"/>
Name of Employer	Occupation		
DEERE & CO	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="230.00"/>
TOTAL This Period (last page this line number only).....	<input type="text"/>

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 90 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOSEPH MASSAQUOI, JR.
 Full Name (Last, First, Middle Initial)
 Mailing Address 1256 W MULLEN AVE
 City WATERLOO State IA Zip Code 50701
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142932
 Amount of Each Receipt this Period
 50.00

B. EDWARD MAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12560 PROMENADE
 City DETROIT State MI Zip Code 48213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141071
 Amount of Each Receipt this Period
 120.00

C. EDWARD MAY
 Full Name (Last, First, Middle Initial)
 Mailing Address 12560 PROMENADE
 City DETROIT State MI Zip Code 48213
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 660.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141581
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	230.00
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 91 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. DYLAN H MAYER
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 353350

City SEATTLE State WA Zip Code 98195-3350

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

Name of Employer WASHINGTON (UNIVERSITY OF) Occupation CLERICAL WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt
11 / 20 / 2014
Transaction ID : SA11AI.141808

Amount of Each Receipt this Period
50.00

B. KAREN MCADAM
Full Name (Last, First, Middle Initial)

Mailing Address 9685 FOREST RIDGE DR.

City CLARKSTON State MI Zip Code 48348

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
10 / 30 / 2014
Transaction ID : SA11AI.142246

Amount of Each Receipt this Period
120.00

C. KAREN MCADAM
Full Name (Last, First, Middle Initial)

Mailing Address 9685 FOREST RIDGE DR.

City CLARKSTON State MI Zip Code 48348

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11AI.141714

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 200.00

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 92 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SANDY MCALLISTER
Full Name (Last, First, Middle Initial)

Mailing Address 213 LAUREL CREEK DR.

City BESSEMER CITY	State NC	Zip Code 28016-8598
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FEC ID number of contributing federal political committee. **C**

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2014

Transaction ID : SA11Al.142198

Amount of Each Receipt this Period
100.00

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

Mailing Address 335 EAST ELDER ST APT 1

City DIKE	State IA	Zip Code 50624
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FEC ID number of contributing federal political committee. **C**

Name of Employer DEERE & CO	Occupation FACTORY WORKER
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11Al.142419

Amount of Each Receipt this Period
90.00

C. JOHN MCCULLEY
Full Name (Last, First, Middle Initial)

Mailing Address 335 EAST ELDER ST APT 1

City DIKE	State IA	Zip Code 50624
--------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY 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
11	/	17	/	2014

Transaction ID : SA11Al.142250

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 93 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. DOUGLAS MC KENNEY
Full Name (Last, First, Middle Initial)
Mailing Address 5588 SPRINGBROOK RD

City ROCKFORD	State IL	Zip Code 61114
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
10	/	30	/	2014

Transaction ID : SA11AI.142882

Amount of Each Receipt this Period
90.00

B. DOUGLAS MC KENNEY
Full Name (Last, First, Middle Initial)
Mailing Address 5588 SPRINGBROOK RD

City ROCKFORD	State IL	Zip Code 61114
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
11	/	21	/	2014

Transaction ID : SA11AI.143530

Amount of Each Receipt this Period
30.00

C. JOSEPH MCMAHON
Full Name (Last, First, Middle Initial)
Mailing Address 4427 GREEN VALLEY DR.

City ARNOLD	State MO	Zip Code 63010-3407
----------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141641

Amount of Each Receipt this Period
150.00

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 94 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOSEPH MCMAHON
Full Name (Last, First, Middle Initial)

Mailing Address 4427 GREEN VALLEY DR.

City ARNOLD	State MO	Zip Code 63010-3407
----------------	-------------	------------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.141987

Amount of Each Receipt this Period

50.00

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

Mailing Address 2189 FOREST LN

City ARNOLD	State MO	Zip Code 63010
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FEC ID number of contributing federal political committee. **C**

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142356

Amount of Each Receipt this Period

150.00

C. JOHN MILLER
Full Name (Last, First, Middle Initial)

Mailing Address 2189 FOREST LN

City ARNOLD	State MO	Zip Code 63010
----------------	-------------	-------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.142525

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	250.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 95 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STEPHEN MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12521 N ENGLEWOOD CT
 City DUNLAP State IL Zip Code 61525-9548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 05 / 2014
Transaction ID : SA11AI.141080
 Amount of Each Receipt this Period
 35.00

B. STEPHEN MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12521 N ENGLEWOOD CT
 City DUNLAP State IL Zip Code 61525-9548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 06 / 2014
Transaction ID : SA11AI.142120
 Amount of Each Receipt this Period
 35.00

C. STEPHEN MITCHELL
 Full Name (Last, First, Middle Initial)
 Mailing Address 12521 N ENGLEWOOD CT
 City DUNLAP State IL Zip Code 61525-9548
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.142127
 Amount of Each Receipt this Period
 70.00

SUBTOTAL of Receipts This Page (optional).....	140.00
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 96 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. AUBREY MOBLEY		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 21 / 2014 Transaction ID : SA11AI.142937
Mailing Address 201 MESSER DRIVE		Amount of Each Receipt this Period 300.00
City PARAGOULD	State AZ	Zip Code 72450
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
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. BRIAN MOENS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 10 / 30 / 2014 Transaction ID : SA11AI.141161
Mailing Address 1703 12TH ST		Amount of Each Receipt this Period 90.00
City SILVIS	State IL	Zip Code 61282
FEC ID number of contributing federal political committee. C		
Name of Employer DEERE & CO	Occupation FACTORY 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) C. BRIAN MOENS		Date of Receipt M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2014 Transaction ID : SA11AI.140992
Mailing Address 1703 12TH ST		Amount of Each Receipt this Period 30.00
City SILVIS	State IL	Zip Code 61282
FEC ID number of contributing federal political committee. C		
Name of Employer DEERE & CO	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional).....▶	420.00
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 97 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JUANITA MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 2656 LANTERN LANE APT 203

City AUBURN HILLS	State MI	Zip Code 48326
----------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142887

Amount of Each Receipt this Period

2014	10	30	500.00
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B. JUANITA MOORE
Full Name (Last, First, Middle Initial)

Mailing Address 2656 LANTERN LANE APT 203

City AUBURN HILLS	State MI	Zip Code 48326
----------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
505.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.143022

Amount of Each Receipt this Period

2014	11	21	5.00
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C. CHRIS D MORELAND
Full Name (Last, First, Middle Initial)

Mailing Address 4809 CHRISTY DR.

City KINGMAN	State AZ	Zip Code 86409
-----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142634

Amount of Each Receipt this Period

2014	10	30	200.00
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SUBTOTAL of Receipts This Page (optional).....▶	220.00
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 98 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. CHRIS D MORELAND
Full Name (Last, First, Middle Initial)

Mailing Address 4809 CHRISTY DR.

City KINGMAN State AZ Zip Code 86409

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141759

Amount of Each Receipt this Period
 50.00

B. GERRI MORELAND
Full Name (Last, First, Middle Initial)

Mailing Address 4809 CHRISTY DR

City KINGMAN State AZ Zip Code 86409

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143493

Amount of Each Receipt this Period
 200.00

C. GERRI MORELAND
Full Name (Last, First, Middle Initial)

Mailing Address 4809 CHRISTY DR

City KINGMAN State AZ Zip Code 86409

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 625.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142907

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 300.00

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 99 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RICHARD MOREY			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>30</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.141258			M	M	/	D	D	/	Y	Y	Y	Y	10			30			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
10			30			2014																			
Mailing Address 5651 HELEN ST			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">150.00</td> </tr> </table>			150.00																			
150.00																									
City GARDEN CITY	State MI	Zip Code 48135																							
FEC ID number of contributing federal political committee. C																									
Name of Employer FORD MOTOR COMPANY		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">600.00</td> </tr> </table>			600.00																				
600.00																									

Full Name (Last, First, Middle Initial) B. RICHARD MOREY			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>11</td><td></td><td></td><td>17</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.141962			M	M	/	D	D	/	Y	Y	Y	Y	11			17			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
11			17			2014																			
Mailing Address 5651 HELEN ST			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">50.00</td> </tr> </table>			50.00																			
50.00																									
City GARDEN CITY	State MI	Zip Code 48135																							
FEC ID number of contributing federal political committee. C																									
Name of Employer FORD MOTOR COMPANY		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">650.00</td> </tr> </table>			650.00																				
650.00																									

Full Name (Last, First, Middle Initial) C. ROJELIO MUNGUIA			Date of Receipt <table border="1" style="width:100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>10</td><td></td><td></td><td>30</td><td></td><td></td><td>2014</td><td></td><td></td><td></td> </tr> </table> Transaction ID : SA11AI.142739			M	M	/	D	D	/	Y	Y	Y	Y	10			30			2014			
M	M	/	D	D	/	Y	Y	Y	Y																
10			30			2014																			
Mailing Address 1450 N HWY 360 APT 159			Amount of Each Receipt this Period <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">150.00</td> </tr> </table>			150.00																			
150.00																									
City GRAND PRAIRIE	State TX	Zip Code 75050-2587																							
FEC ID number of contributing federal political committee. C																									
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER																							
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">350.00</td> </tr> </table>			350.00																				
350.00																									

SUBTOTAL of Receipts This Page (optional).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10">350.00</td> </tr> </table>	350.00									
350.00											
TOTAL This Period (last page this line number only).....▶	<table border="1" style="width:100%; text-align: center;"> <tr> <td colspan="10"> </td> </tr> </table>										

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 100 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ROJELIO MUNGUIA
 Full Name (Last, First, Middle Initial)
 Mailing Address 1450 N HWY 360 APT 159
 City GRAND PRAIRIE State TX Zip Code 75050-2587
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142394
 Amount of Each Receipt this Period
 50.00

B. ROBERT MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8204 CORK RD
 City GREENWOOD State MI Zip Code 48006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation RETIRED
 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
 10 / 30 / 2014
Transaction ID : SA11AI.143259
 Amount of Each Receipt this Period
 90.00

C. ROBERT MURPHY
 Full Name (Last, First, Middle Initial)
 Mailing Address 8204 CORK RD
 City GREENWOOD State MI Zip Code 48006
 FEC ID number of contributing federal political committee. **C**
 Name of Employer FORD MOTOR COMPANY Occupation RETIRED
 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
 11 / 17 / 2014
Transaction ID : SA11AI.143433
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 101 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES MYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 N. 10TH RD.
 City WENONA State IL Zip Code 61377-9526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 05 / 2014
Transaction ID : SA11AI.141633
 Amount of Each Receipt this Period
 30.00

B. JAMES MYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 N. 10TH RD.
 City WENONA State IL Zip Code 61377-9526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY 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
 11 / 06 / 2014
Transaction ID : SA11AI.142345
 Amount of Each Receipt this Period
 30.00

C. JAMES MYER
 Full Name (Last, First, Middle Initial)
 Mailing Address 903 N. 10TH RD.
 City WENONA State IL Zip Code 61377-9526
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CATERPILLAR INC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.141111
 Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 120.00
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 102 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. DENNIS MYRICK

Mailing Address 712 B N. MORRISON

City State Zip Code
 KOKOMO IN 46901

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 250.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141026

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. JON NEIL

Mailing Address 13052 20TH STREET

City State Zip Code
 BLOOMFIELD IA 52537

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

Name of Employer Occupation
 DEERE & CO FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141220

Amount of Each Receipt this Period
 90.00

Full Name (Last, First, Middle Initial)
C. JON NEIL

Mailing Address 13052 20TH STREET

City State Zip Code
 BLOOMFIELD IA 52537

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

Name of Employer Occupation
 DEERE & CO FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.142636

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00

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 103 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 8642 EAST 400 NORTH

City GREENTOWN State IN Zip Code 46936

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141881

Amount of Each Receipt this Period
 90.00

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

Mailing Address 8642 EAST 400 NORTH

City GREENTOWN State IN Zip Code 46936

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142060

Amount of Each Receipt this Period
 30.00

C. JOHN NESBITT III
Full Name (Last, First, Middle Initial)

Mailing Address 2008 15TH ST BOX 104

City VIOLA State IL Zip Code 61486

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143476

Amount of Each Receipt this Period
 90.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 104 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JOHN NESBITT III
Full Name (Last, First, Middle Initial)

Mailing Address 2008 15TH ST BOX 104

City VIOLA	State IL	Zip Code 61486
---------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY WORKER
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.143477

Amount of Each Receipt this Period
300.00

B. TROY NEWBERRY
Full Name (Last, First, Middle Initial)

Mailing Address 721 POST ST

City SAGINAW	State MI	Zip Code 48602
-----------------	-------------	-------------------

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

Name of Employer L3 COMMUNICATIONS	Occupation FACTORY WORKER
---------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
660.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.143269

Amount of Each Receipt this Period
195.00

C. SAMUEL NYLAND
Full Name (Last, First, Middle Initial)

Mailing Address 3307 COVINA DR

City WATERLOO	State IA	Zip Code 50701
------------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY WORKER
--------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141781

Amount of Each Receipt this Period
90.00

SUBTOTAL of Receipts This Page (optional).....▶	315.00
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 105 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SAMUEL NYLAND
Full Name (Last, First, Middle Initial)

Mailing Address 3307 COVINA DR

City WATERLOO State IA Zip Code 50701

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
11 / 17 / 2014
Transaction ID : SA11Al.141091

Amount of Each Receipt this Period
30.00

B. CALVIN J OATIS
Full Name (Last, First, Middle Initial)

Mailing Address 1833 N.19TH ST

City MILWAUKEE State WI Zip Code 53205

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
11 / 21 / 2014
Transaction ID : SA11Al.141997

Amount of Each Receipt this Period
30.00

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

Mailing Address 6122 E HIGGINS LAKE DR

City ROSCOMMON State MI Zip Code 48653-9351

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
10 / 30 / 2014
Transaction ID : SA11Al.142008

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	210.00
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 106 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DAVID OFFENHEISER		Date of Receipt
Mailing Address 6122 E HIGGINS LAKE DR		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ROSCOMMON	MI	48653-9351
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141658
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="50.00"/>
RETIRED		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="650.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. JOSHUA OVERTON		Date of Receipt
Mailing Address 412 NORTH L STREET		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
INDIANOLA	IA	50125
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142655
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="90.00"/>
DEERE & CO		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. MYRON PARIS		Date of Receipt
Mailing Address 16513 E 53RD ST CT S		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
INDEPENDENCE	MO	64055-6827
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141306
Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text" value="150.00"/>
GENERAL MOTORS CORPORATION		
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="290.00"/>
TOTAL 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: PAGE 107 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MYRON PARIS
 Full Name (Last, First, Middle Initial)
 Mailing Address 16513 E 53RD ST CT S
 City INDEPENDENCE State MO Zip Code 64055-6827
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142722
 Amount of Each Receipt this Period
 50.00

B. MICHAEL PARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2708 34TH ST APT 10
 City ROCK ISLAND State IL Zip Code 61201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 10 / 30 / 2014
Transaction ID : SA11AI.141144
 Amount of Each Receipt this Period
 90.00

C. MICHAEL PARR
 Full Name (Last, First, Middle Initial)
 Mailing Address 2708 34TH ST APT 10
 City ROCK ISLAND State IL Zip Code 61201
 FEC ID number of contributing federal political committee. **C**
 Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.142560
 Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 170.00
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 108 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 9236 24TH AVE SW

City SEATTLE State WA Zip Code 98106-2602

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

Name of Employer UNIVERSITY OF WASHINGTON Occupation CLERICAL WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 / /
11 / 20 / 2014

Transaction ID : SA11AI.141622

Amount of Each Receipt this Period
 50.00

Full Name (Last, First, Middle Initial)
B. LINDA PATTON

Mailing Address 2109 E 4TH ST

City ROYAL OAK State MI Zip Code 48067-3921

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 / /
10 / 30 / 2014

Transaction ID : SA11AI.141385

Amount of Each Receipt this Period
 150.00

Full Name (Last, First, Middle Initial)
C. LINDA PATTON

Mailing Address 2109 E 4TH ST

City ROYAL OAK State MI Zip Code 48067-3921

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 / /
11 / 17 / 2014

Transaction ID : SA11AI.141051

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text"/> 250.00
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 109 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. PERRY PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 411 AMERICAN RD

City NASHVILLE State TN Zip Code 37209-2993

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

Name of Employer CENTRAL GLASS CO LTD Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11AI.142835

Amount of Each Receipt this Period
 150.00

B. WAYNE PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 39117 PRENTISS RD.,APT. 102

City HARRISON, TWP. State MI Zip Code 48045

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143427

Amount of Each Receipt this Period
 180.00

C. WAYNE PATTON
Full Name (Last, First, Middle Initial)

Mailing Address 39117 PRENTISS RD.,APT. 102

City HARRISON, TWP. State MI Zip Code 48045

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143428

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional).....▶	390.00
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 110 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 7397 E 100 S

City GREENTOWN	State IN	Zip Code 46936
-------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
10	/	30	/	2014

Transaction ID : SA11AI.143312

Amount of Each Receipt this Period
90.00

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

Mailing Address 7397 E 100 S

City GREENTOWN	State IN	Zip Code 46936
-------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
11	/	21	/	2014

Transaction ID : SA11AI.142928

Amount of Each Receipt this Period
30.00

Full Name (Last, First, Middle Initial)
C. JAMES POSEY

Mailing Address 6903 N WALNUT

City GLADSTONE	State MO	Zip Code 64118-2516
-------------------	-------------	------------------------

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

Name of Employer	Occupation RETIRED
------------------	-----------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	21	/	2014

Transaction ID : SA11AI.142657

Amount of Each Receipt this Period
600.00

SUBTOTAL of Receipts This Page (optional).....▶	720.00
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 111 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. HATTIE PRICE
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 23632

City ST LOUIS	State MO	Zip Code 63112
------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
208.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.142194

Amount of Each Receipt this Period
26.00

B. RICHARD QUIRK
Full Name (Last, First, Middle Initial)
Mailing Address 2125 CHEVY CT.

City KOKOMO	State IN	Zip Code 46902
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
10	/	30	/	2014

Transaction ID : SA11AI.142884

Amount of Each Receipt this Period
120.00

C. RICHARD QUIRK
Full Name (Last, First, Middle Initial)
Mailing Address 2125 CHEVY CT.

City KOKOMO	State IN	Zip Code 46902
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.143398

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional).....▶	186.00
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 112 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 815 CENTER AVE

City INDEPENDENCE State IA Zip Code 50644

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141245

Amount of Each Receipt this Period
 90.00

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

Mailing Address 815 CENTER AVE

City INDEPENDENCE State IA Zip Code 50644

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.141420

Amount of Each Receipt this Period
 30.00

C. STANLEY REASONS
Full Name (Last, First, Middle Initial)

Mailing Address 26249 TIMBERLINE DR.

City WARRENTON State MO Zip Code 63383

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142948

Amount of Each Receipt this Period
 150.00

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 113 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. STANLEY REASONS
Full Name (Last, First, Middle Initial)
Mailing Address 26249 TIMBERLINE DR.
City WARRENTON State MO Zip Code 63383
FEC ID number of contributing federal political committee. **C**
Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 400.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SA11AI.143011
Amount of Each Receipt this Period
50.00

B. CLARENCE REED
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 7202
City ST. HTS State MI Zip Code 48311-7202
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 720.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.142529
Amount of Each Receipt this Period
180.00

C. CLARENCE REED
Full Name (Last, First, Middle Initial)
Mailing Address P.O. BOX 7202
City ST. HTS State MI Zip Code 48311-7202
FEC ID number of contributing federal political committee. **C**
Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
Receipt For: Primary General Other (specify) Aggregate Year-to-Date 780.00

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.141285
Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 290.00
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 114 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DOUGLAS RETHEMEYER		Date of Receipt
Mailing Address 8094 RIVERVIEW DRIVE		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
DITTMER	MO	63023-2308
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142178
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
ENSIGN-BICKFORD INDUSTRIES INC	FACTORY WORKER	
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. JACQUET RICHARDS		Date of Receipt
Mailing Address P O BOX 80		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
EASTPOINTE	MI	48021
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141844
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="180.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="660.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JACQUET RICHARDS		Date of Receipt
Mailing Address P O BOX 80		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
EASTPOINTE	MI	48021
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142027
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="290.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 115 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. NICHOLAS RICHARDS			Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2014 Transaction ID : SA11AI.141440
Mailing Address 2017 N. 35TH RD.			Amount of Each Receipt this Period 30.00
City OTTAWA	State IL	Zip Code 61350-9433	
FEC ID number of contributing federal political committee. C			
Name of Employer CATERPILLAR INC	Occupation FACTORY 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. NICHOLAS RICHARDS			Date of Receipt M M / D D / Y Y Y Y Y 11 / 06 / 2014 Transaction ID : SA11AI.141626
Mailing Address 2017 N. 35TH RD.			Amount of Each Receipt this Period 30.00
City OTTAWA	State IL	Zip Code 61350-9433	
FEC ID number of contributing federal political committee. C			
Name of Employer CATERPILLAR INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) C. NICHOLAS RICHARDS			Date of Receipt M M / D D / Y Y Y Y Y 11 / 18 / 2014 Transaction ID : SA11AI.141106
Mailing Address 2017 N. 35TH RD.			Amount of Each Receipt this Period 60.00
City OTTAWA	State IL	Zip Code 61350-9433	
FEC ID number of contributing federal political committee. C			
Name of Employer CATERPILLAR INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional).....	120.00
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 116 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. WILLIAM RICHMOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 14530 HARTWELL
 City State Zip Code
 DETROIT MI 48227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 667.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143383
 Amount of Each Receipt this Period
 120.00

B. WILLIAM RICHMOND
 Full Name (Last, First, Middle Initial)
 Mailing Address 14530 HARTWELL
 City State Zip Code
 DETROIT MI 48227
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 727.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143140
 Amount of Each Receipt this Period
 60.00

C. JOANNE RILEY
 Full Name (Last, First, Middle Initial)
 Mailing Address 11125 S.E. 97TH STREET
 City State Zip Code
 OKLAHOMA CITY OK 73165
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 RETIRED
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 675.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.141657
 Amount of Each Receipt this Period
 675.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 855.00
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 117 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ROBERT RILEY			Date of Receipt
Mailing Address 11125 SE 97TH ST			<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142220
OKLAHOMA CITY	OK	73165	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		
GENERAL MOTORS CORPORATION	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="300.00"/>		

Full Name (Last, First, Middle Initial) B. ROBERT RILEY			Date of Receipt
Mailing Address 11125 SE 97TH ST			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142221
OKLAHOMA CITY	OK	73165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="6.00"/>
Name of Employer	Occupation		
GENERAL MOTORS CORPORATION	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="306.00"/>		

Full Name (Last, First, Middle Initial) C. ROBERT RILEY			Date of Receipt
Mailing Address 11125 SE 97TH ST			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.141859
OKLAHOMA CITY	OK	73165	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="2.00"/>
Name of Employer	Occupation		
GENERAL MOTORS CORPORATION	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="308.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="308.00"/>
TOTAL 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 118 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. FRANK RIZZO		Date of Receipt
Mailing Address 36834 LODGE DR.		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
STERLING HEIGHTS	MI	48312
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.143090
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="335.00"/>	

Full Name (Last, First, Middle Initial) B. FRANK RIZZO		Date of Receipt
Mailing Address 36834 LODGE DR.		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
STERLING HEIGHTS	MI	48312
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.143159
Name of Employer	Occupation	Amount of Each Receipt this Period
CHRYSLER LLC	FACTORY WORKER	<input type="text" value="25.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="360.00"/>	

Full Name (Last, First, Middle Initial) C. DENNIS ROBERTS		Date of Receipt
Mailing Address 4403 11TH STREET		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
EAST MOLINE	IL	61244
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.141162
Name of Employer	Occupation	Amount of Each Receipt this Period
DEERE & CO	FACTORY WORKER	<input type="text" value="90.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="140.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 119 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DENNIS ROBERTS			Date of Receipt
Mailing Address 4403 11TH STREET			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.140993
EAST MOLINE	IL	61244	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="30.00"/>
Name of Employer	Occupation		
DEERE & CO	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. D'URVILLE ROBINSON			Date of Receipt
Mailing Address 23475 MICHELE CT.			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.141538
CLINTON TOWNSHIP	MI	48036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="180.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="660.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. D'URVILLE ROBINSON			Date of Receipt
Mailing Address 23475 MICHELE CT.			<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City	State	Zip Code	Transaction ID : SA11AI.141180
CLINTON TOWNSHIP	MI	48036	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="270.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 120 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. EDWARD ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 1523 COULTER FOREST

City KIRKWOOD State MO Zip Code 63122

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143210

Amount of Each Receipt this Period
 150.00

B. EDWARD ROBINSON
Full Name (Last, First, Middle Initial)

Mailing Address 1523 COULTER FOREST

City KIRKWOOD State MO Zip Code 63122

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143325

Amount of Each Receipt this Period
 50.00

C. DAWN ROGERS
Full Name (Last, First, Middle Initial)

Mailing Address 135 E. NORTH ST.,BOX 143

City CAPRON State IL Zip Code 61012

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142883

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 230.00

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 121 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. THOMAS ROMANS		Date of Receipt
Mailing Address 717 CALUMETT DR		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City CEDAR FALLS	State IA	Zip Code 50613
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.141503
Name of Employer DEERE & CO	Occupation FACTORY WORKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="90.00"/>
	<input type="text" value="210.00"/>	

Full Name (Last, First, Middle Initial) B. THOMAS ROMANS		Date of Receipt
Mailing Address 717 CALUMETT DR		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City CEDAR FALLS	State IA	Zip Code 50613
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.141146
Name of Employer DEERE & CO	Occupation FACTORY WORKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="30.00"/>
	<input type="text" value="240.00"/>	

Full Name (Last, First, Middle Initial) C. JULIO ROSARIO		Date of Receipt
Mailing Address APT 5,311 DONNA ST		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City DENVER	State IA	Zip Code 50622
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.142383
Name of Employer DEERE & CO	Occupation FACTORY WORKER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="90.00"/>
	<input type="text" value="210.00"/>	

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="210.00"/>
TOTAL 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: PAGE 122 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. HENRY SALAZAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 14317 VINCENT WAY
 City State Zip Code
 ADELANTO CA 92301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142823
 Amount of Each Receipt this Period
 100.00

B. HENRY SALAZAR
 Full Name (Last, First, Middle Initial)
 Mailing Address 14317 VINCENT WAY
 City State Zip Code
 ADELANTO CA 92301
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 605.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142130
 Amount of Each Receipt this Period
 55.00

C. PAUL SANCHEZ
 Full Name (Last, First, Middle Initial)
 Mailing Address 10 NO. JOYCE ELLEN WAY
 City State Zip Code
 ST PETERS MO 63376
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 FORD MOTOR COMPANY FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 580.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142810
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 305.00
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 123 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. PAUL SANCHEZ		Date of Receipt
Mailing Address 10 NO. JOYCE ELLEN WAY		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.141766
ST PETERS	MO	Amount of Each Receipt this Period
Zip Code		<input type="text" value="50.00"/>
63376		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
FORD MOTOR COMPANY	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="630.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. SONYA SARGENT		Date of Receipt
Mailing Address 19341 NADOL		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.142983
SOUTHFIELD	MI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="180.00"/>
48075		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY 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) C. SONYA SARGENT		Date of Receipt
Mailing Address 19341 NADOL		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Transaction ID : SA11AI.142906
SOUTHFIELD	MI	Amount of Each Receipt this Period
Zip Code		<input type="text" value="60.00"/>
48075		
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY 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) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="290.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 124 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SHERRY SAUNDERS
Full Name (Last, First, Middle Initial)

Mailing Address 761 SCOTTWOOD STREET

City PONTIAC State MI Zip Code 48340

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

Name of Employer CHRYSLER LLC Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.141084

Amount of Each Receipt this Period
 60.00

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

Mailing Address 3412 CLOVER HILLS DR

City BETTENDORF State IA Zip Code 52722

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142891

Amount of Each Receipt this Period
 90.00

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

Mailing Address 3412 CLOVER HILLS DR

City BETTENDORF State IA Zip Code 52722

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

Name of Employer DEERE & CO Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.143095

Amount of Each Receipt this Period
 30.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 180.00

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 125 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SCOTT SCHULDT
Full Name (Last, First, Middle Initial)

Mailing Address 316 9TH AVE SW

City OELWEIN State IA Zip Code 50662

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143005

Amount of Each Receipt this Period
 120.00

B. SCOTT SCHULDT
Full Name (Last, First, Middle Initial)

Mailing Address 316 9TH AVE SW

City OELWEIN State IA Zip Code 50662

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

Name of Employer DEERE & CO Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142933

Amount of Each Receipt this Period
 40.00

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

Mailing Address 19109 PARKWOOD LANE

City BROWNSTOWN State MI Zip Code 48183

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 575.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143469

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 126 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 19109 PARKWOOD LANE

City BROWNSTOWN State MI Zip Code 48183

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

Name of Employer Occupation
RETIRE

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
625.00

Date of Receipt
11 / 17 / 2014
Transaction ID : SA11AI.143163

Amount of Each Receipt this Period
50.00

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

Mailing Address 2488 120TH AVE

City BLOOMFIELD State IA Zip Code 52537

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

Name of Employer Occupation
DEERE & CO FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
11 / 17 / 2014
Transaction ID : SA11AI.141038

Amount of Each Receipt this Period
30.00

C. RICKY SILVA
Full Name (Last, First, Middle Initial)

Mailing Address 108 APACHE DRIVE

City PICAYUNE State MS Zip Code 39466

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

Name of Employer Occupation
THE J. M. SMUCKER COMPANY FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
325.00

Date of Receipt
10 / 29 / 2014
Transaction ID : SA11AI.141976

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 127 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DOUGLAS SIMMS		Date of Receipt
Mailing Address 4553 N. MULFORD RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code MONROE CENTER IL 61052		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.142267
Name of Employer Occupation CHRYSLER LLC FACTORY WORKER		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="90.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="210.00"/>		

Full Name (Last, First, Middle Initial) B. DOUGLAS SIMMS		Date of Receipt
Mailing Address 4553 N. MULFORD RD		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code MONROE CENTER IL 61052		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.141907
Name of Employer Occupation CHRYSLER LLC FACTORY WORKER		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="30.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="240.00"/>		

Full Name (Last, First, Middle Initial) C. ETHEL SIMS		Date of Receipt
Mailing Address 11872 LAPADERA LANE		<input type="text" value="M M M"/> / <input type="text" value="D D D"/> / <input type="text" value="Y Y Y Y Y Y"/>
City State Zip Code FLORISSANT MO 63033-8159		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Transaction ID : SA11AI.142660
Name of Employer Occupation CHRYSLER LLC FACTORY WORKER		Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		<input type="text" value="26.00"/>
Aggregate Year-to-Date ▼ <input type="text" value="208.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="146.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 128 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. KATHY SLUSHER

Mailing Address 5100 TIFFIN AVENUE

City State Zip Code
 CASTALIA OH 44824-9431

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

Name of Employer Occupation
 VACATIONLAND FEDERAL CR UN CLERICAL WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 210.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 29 / 2014
Transaction ID : SA11AI.142149

Amount of Each Receipt this Period
 300.00

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

Mailing Address 105 GENERALS WAY CT

City State Zip Code
 FRANKLIN TN 37064-4981

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

Name of Employer Occupation
 SATURN FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 385.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142614

Amount of Each Receipt this Period
 75.00

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

Mailing Address 105 GENERALS WAY CT

City State Zip Code
 FRANKLIN TN 37064-4981

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

Name of Employer Occupation
 SATURN FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 410.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142078

Amount of Each Receipt this Period
 25.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 130.00

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 129 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RONALD SMITH		Date of Receipt
Mailing Address 3185 CURTIS RD		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
BIRCH RUN	MI	48415-9021
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.141895
GENERAL MOTORS CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="605.00"/>	<input type="text" value="165.00"/>

Full Name (Last, First, Middle Initial) B. RONALD SMITH		Date of Receipt
Mailing Address 3185 CURTIS RD		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
BIRCH RUN	MI	48415-9021
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.142603
GENERAL MOTORS CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="660.00"/>	<input type="text" value="55.00"/>

Full Name (Last, First, Middle Initial) C. TRAVIS SNIDER		Date of Receipt
Mailing Address 501 WEST WASHINGTON ST.		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
WAYNETOWN	IN	47990
FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer	Occupation	Transaction ID : SA11AI.142111
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="600.00"/>	<input type="text" value="150.00"/>

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="370.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 130 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. TRAVIS SNIDER
Full Name (Last, First, Middle Initial)

Mailing Address 501 WEST WASHINGTON ST.

City WAYNETOWN	State IN	Zip Code 47990
-------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.142291

Amount of Each Receipt this Period

50.00

B. RONALD SODKO
Full Name (Last, First, Middle Initial)

Mailing Address P.O BOX 477

City CHERRY VALLEY	State IL	Zip Code 61016
-----------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
11	/	21	/	2014

Transaction ID : SA11AI.142628

Amount of Each Receipt this Period

30.00

C. GEORGE SOLANDER
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 597

City FLAT ROCK	State OH	Zip Code 44828-0597
-------------------	-------------	------------------------

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

Name of Employer BELLEVUE MFG CO	Occupation FACTORY WORKER
-------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : SA11AI.141807

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....▶	130.00
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 131 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SALLY SOWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 GOLDA LANE
 City FENTON State MO Zip Code 63026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141985
 Amount of Each Receipt this Period
 150.00

B. SALLY SOWARDS
 Full Name (Last, First, Middle Initial)
 Mailing Address 218 GOLDA LANE
 City FENTON State MO Zip Code 63026
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 650.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142694
 Amount of Each Receipt this Period
 50.00

C. MICHELE SPRINGER
 Full Name (Last, First, Middle Initial)
 Mailing Address 26087 DOVER
 City WARREN State MI Zip Code 48089
 FEC ID number of contributing federal political committee. **C**
 Name of Employer CHRYSLER LLC Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 443.00

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141729
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 132 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MICHELE SPRINGER
Full Name (Last, First, Middle Initial)

Mailing Address 26087 DOVER

City WARREN State MI Zip Code 48089

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 468.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.142610

Amount of Each Receipt this Period
 25.00

B. RONALD SPURLOCK
Full Name (Last, First, Middle Initial)

Mailing Address 103 SOUTH HAMPTON

City OAK LEAF State TX Zip Code 75154-3847

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 21 / 2014
Transaction ID : SA11AI.143207

Amount of Each Receipt this Period
 600.00

C. DONALD STAHL
Full Name (Last, First, Middle Initial)

Mailing Address 2013 DOHACK DRIVE

City ARNOLD State MO Zip Code 63010

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141347

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 775.00

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 133 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DONALD STAHL		Date of Receipt
Mailing Address 2013 DOHACK DRIVE		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ARNOLD	MO	63010
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141872
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="50.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
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. DONNA STAHL		Date of Receipt
Mailing Address 2013 DOHACK DR.		<input type="text" value="10"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
ARNOLD	MO	63010
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142939
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="300.00"/>
Name of Employer	Occupation	
	RETIRED	
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) C. NORMAN STANTON JR		Date of Receipt
Mailing Address 15931 AVON		<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code
DETROIT	MI	48223
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141403
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="60.00"/>
Name of Employer	Occupation	
CHRYSLER LLC	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="240.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="410.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 134 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. ALEXANDER STANUCH
Full Name (Last, First, Middle Initial)

Mailing Address 1725 EAST STATE STREET

City State Zip Code
ROCKFORD IL 61104

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
216.36

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141692

Amount of Each Receipt this Period
108.18

B. ALEXANDER STANUCH
Full Name (Last, First, Middle Initial)

Mailing Address 1725 EAST STATE STREET

City State Zip Code
ROCKFORD IL 61104

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

Name of Employer Occupation
CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
252.42

Date of Receipt
M M / D D / Y Y Y Y Y
11 / 21 / 2014
Transaction ID : SA11AI.142573

Amount of Each Receipt this Period
36.06

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

Mailing Address 2665 LEWISBERRY RD

City State Zip Code
YORK PA 17404-1345

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

Name of Employer Occupation
JOHNSON CONTROLS INC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
280.00

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.142388

Amount of Each Receipt this Period
70.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 214.24

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 135 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. AARON ST CLAIR
Full Name (Last, First, Middle Initial)

Mailing Address 2010 E. 500 N.

City KOKOMO	State IN	Zip Code 46901
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY 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
10	/	30	/	2014

Transaction ID : SA11AI.142293

Amount of Each Receipt this Period
75.00

B. AARON ST CLAIR
Full Name (Last, First, Middle Initial)

Mailing Address 2010 E. 500 N.

City KOKOMO	State IN	Zip Code 46901
----------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
475.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.141395

Amount of Each Receipt this Period
25.00

C. NATHAN STRANGE
Full Name (Last, First, Middle Initial)

Mailing Address 1101 CARTHAGE WAY

City ARLINGTON	State TX	Zip Code 76017-6556
-------------------	-------------	------------------------

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

Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER
--------------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	13	/	2014

Transaction ID : SA11AI.142157

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	200.00
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 136 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DAVID STUDAKER			Date of Receipt
Mailing Address 4115 TRISTEN AV			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142427
FORT GRATIOT	MI	48059	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="180.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DAVID STUDAKER			Date of Receipt
Mailing Address 4115 TRISTEN AV			<input type="text" value="11"/> / <input type="text" value="21"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.141552
FORT GRATIOT	MI	48059	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="60.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="780.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. CHARLES SUTTON			Date of Receipt
Mailing Address 129 WASHINGTON ST			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142643
MOUNT CLEMENS	MI	48043-1603	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="180.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="720.00"/>		
<input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="420.00"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 137 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. CHARLES SUTTON
Full Name (Last, First, Middle Initial)

Mailing Address 129 WASHINGTON ST

City MOUNT CLEMENS State MI Zip Code 48043-1603

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **780.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11Al.141236

Amount of Each Receipt this Period
60.00

B. NEAL SWEENEY
Full Name (Last, First, Middle Initial)

Mailing Address 744C NOBEL DR

City SANTA CRUZ State CA Zip Code 95060

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

Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11Al.143519

Amount of Each Receipt this Period
150.00

C. NEAL SWEENEY
Full Name (Last, First, Middle Initial)

Mailing Address 744C NOBEL DR

City SANTA CRUZ State CA Zip Code 95060

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

Name of Employer CALIFORNIA (UNIVERSITY OF) Occupation CLERICAL WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014

Transaction ID : SA11Al.143070

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional).....▶	310.00
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 138 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. RICHIE TAGUE
Full Name (Last, First, Middle Initial)
Mailing Address 1707 IRONWOOD DRIVE

City GRANGER	State IA	Zip Code 50109
-----------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY 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
10	/	30	/	2014

Transaction ID : SA11AI.141760

Amount of Each Receipt this Period

90.00

B. RICHIE TAGUE
Full Name (Last, First, Middle Initial)
Mailing Address 1707 IRONWOOD DRIVE

City GRANGER	State IA	Zip Code 50109
-----------------	-------------	-------------------

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

Name of Employer DEERE & CO	Occupation FACTORY 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
11	/	17	/	2014

Transaction ID : SA11AI.142457

Amount of Each Receipt this Period

30.00

C. JUDY TAYLOR
Full Name (Last, First, Middle Initial)
Mailing Address 7237 BERKRIDGE DR

City HAZELWOOD	State MO	Zip Code 63042
-------------------	-------------	-------------------

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

Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.142048

Amount of Each Receipt this Period

150.00

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 139 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JUDY TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 7237 BERKRIDGE DR

City HAZELWOOD State MO Zip Code 63042

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142049

Amount of Each Receipt this Period
 50.00

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

Mailing Address P O BOX 6038

City SHREVEPORT State LA Zip Code 71136

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 234.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141768

Amount of Each Receipt this Period
 100.50

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

Mailing Address P O BOX 6038

City SHREVEPORT State LA Zip Code 71136

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 294.50

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.142561

Amount of Each Receipt this Period
 60.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.50

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 140 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ROBERT TAYLOR			Date of Receipt
Mailing Address P O BOX 6038			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.141145
SHREVEPORT	LA	71136	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		
GENERAL MOTORS CORPORATION	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="314.50"/>		

Full Name (Last, First, Middle Initial) B. ROBERT TAYLOR			Date of Receipt
Mailing Address P O BOX 6038			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.142642
SHREVEPORT	LA	71136	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="33.50"/>
Name of Employer	Occupation		
GENERAL MOTORS CORPORATION	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="348.00"/>		

Full Name (Last, First, Middle Initial) C. TIMOTHY TAYLOR			Date of Receipt
Mailing Address 4333 SULGRAVE			<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code	Transaction ID : SA11AI.143426
SWARTZ CREEK	MI	48473	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="120.00"/>
Name of Employer	Occupation		
CHRYSLER LLC	FACTORY WORKER		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="660.00"/>		

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="173.50"/>
TOTAL This Period (last page this line number only).....▶	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 141 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. TIMOTHY TAYLOR
Full Name (Last, First, Middle Initial)

Mailing Address 4333 SULGRAVE

City SWARTZ CREEK State MI Zip Code 48473

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **720.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.143179

Amount of Each Receipt this Period
60.00

B. THOMAS THIBEAULT
Full Name (Last, First, Middle Initial)

Mailing Address 1908 OAK COURT

City POCAHONTAS State AR Zip Code 72455

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.142300

Amount of Each Receipt this Period
300.00

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

Mailing Address 6829 ORANGE LN

City FLINT State MI Zip Code 48505

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **275.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.142011

Amount of Each Receipt this Period
15.00

SUBTOTAL of Receipts This Page (optional).....▶	375.00
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 142 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DEBORAH THOMAS		Date of Receipt
Mailing Address 6829 ORANGE LN		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2014"/>
City	State	Zip Code
FLINT	MI	48505
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.141662
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
GENERAL MOTORS CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="280.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. TIFFANY THOMPSON		Date of Receipt
Mailing Address 2420 23RD AVENUE A		<input type="text" value="11"/> / <input type="text" value="20"/> / <input type="text" value="2014"/>
City	State	Zip Code
MOLINE	IL	61265-4136
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142491
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="30.00"/>
Name of Employer	Occupation	
BLACK HAWK COLLEGE	CLERICAL WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="210.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. CARL TILLERY		Date of Receipt
Mailing Address 2333 DRIFTWOOD APT 414		<input type="text" value="10"/> / <input type="text" value="30"/> / <input type="text" value="2014"/>
City	State	Zip Code
MESQUITE	TX	75150-6131
FEC ID number of contributing federal political committee.		Transaction ID : SA11Al.142071
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="150.00"/>
Name of Employer	Occupation	
	RETIRED	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="350.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional).....	<input type="text" value="185.00"/>
TOTAL 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 143 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. CARL TILLERY

Mailing Address 2333 DRIFTWOOD APT 414

City MESQUITE	State TX	Zip Code 75150-6131
------------------	-------------	------------------------

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

Name of Employer	Occupation
	RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11Al.141724

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
B. EVETTE TONEY

Mailing Address 5244 REVEL ST

City NEW ORLEANS	State LA	Zip Code 70129-1434
---------------------	-------------	------------------------

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

Name of Employer	Occupation
THE J. M. SMUCKER COMPANY	FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **337.50**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	29	/	2014

Transaction ID : SA11Al.141107

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)
C. KIM TOWNSEND

Mailing Address 722 S MONTGOMERY ST

City HASTINGS	State MI	Zip Code 49058-2454
------------------	-------------	------------------------

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

Name of Employer	Occupation
HASTINGS MANUFACTURING	FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **395.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	28	/	2014

Transaction ID : SA11Al.140958

Amount of Each Receipt this Period

395.00

SUBTOTAL of Receipts This Page (optional).....▶	495.00
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 144 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMAL TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12740 GRAYFIELD
 City State Zip Code
 DETROIT MI 48223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 340.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143215
 Amount of Each Receipt this Period
 45.00

B. JAMAL TURNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 12740 GRAYFIELD
 City State Zip Code
 DETROIT MI 48223
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 355.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.143216
 Amount of Each Receipt this Period
 15.00

C. SHAAKIR WAHHAB
 Full Name (Last, First, Middle Initial)
 Mailing Address PO BOX 361251
 City State Zip Code
 GROSSE POINTE FARMS MI 48236-1251
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 420.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143413
 Amount of Each Receipt this Period
 180.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 240.00
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 145 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. SHAAKIR WAHHAB

Mailing Address PO BOX 361251

City State Zip Code
 GROSE POINTE FARMS MI 48236-1251

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142962

Amount of Each Receipt this Period
 60.00

Full Name (Last, First, Middle Initial)
B. RICHARD WARD

Mailing Address 2492 N. 600 E.

City State Zip Code
 KOKOMO IN 46901

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 550.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141290

Amount of Each Receipt this Period
 100.00

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

Mailing Address 2492 N. 600 E.

City State Zip Code
 KOKOMO IN 46901

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

Name of Employer Occupation
 CHRYSLER LLC FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11AI.141291

Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 210.00

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 146 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. BRENDA WARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2534 HELMET ST
 City IRVING State TX Zip Code 75060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143296
 Amount of Each Receipt this Period
 150.00

B. BRENDA WARNER
 Full Name (Last, First, Middle Initial)
 Mailing Address 2534 HELMET ST
 City IRVING State TX Zip Code 75060
 FEC ID number of contributing federal political committee. **C**
 Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142974
 Amount of Each Receipt this Period
 50.00

C. NICK WATERWALL
 Full Name (Last, First, Middle Initial)
 Mailing Address 110 JOHN DR
 City SLIDELL State LA Zip Code 70461-1824
 FEC ID number of contributing federal political committee. **C**
 Name of Employer LOCKHEED MARTIN CORPORATION Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M / D D / Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.142683
 Amount of Each Receipt this Period
 50.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 250.00
TOTAL This Period (last page this line number only)..... ▶

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 147 OF 183
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. SANDRA WATKINS
Full Name (Last, First, Middle Initial)

Mailing Address 4406 HUNT CLUB DRIVE,APT 1B

City YPSILANTI	State MI	Zip Code 48197
-------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.141944

Amount of Each Receipt this Period
150.00

B. SANDRA WATKINS
Full Name (Last, First, Middle Initial)

Mailing Address 4406 HUNT CLUB DRIVE,APT 1B

City YPSILANTI	State MI	Zip Code 48197
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FEC ID number of contributing federal political committee. **C**

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 11 / 21 / 2014
Transaction ID : SA11Al.142471

Amount of Each Receipt this Period
50.00

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

Mailing Address 5113 COVENTRY PKWY # B25

City FORT WAYNE	State IN	Zip Code 46804-7119
--------------------	-------------	------------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
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Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **575.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11Al.143028

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional).....▶	400.00
TOTAL This Period (last page this line number only).....▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 148 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 5113 COVENTRY PKWY # B25

City FORT WAYNE	State IN	Zip Code 46804-7119
--------------------	-------------	------------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	21	/	2014

Transaction ID : SA11AI.143099

Amount of Each Receipt this Period

90.00

50.00

B. BOBBIE WEATHERFORD
Full Name (Last, First, Middle Initial)

Mailing Address 3084 S GENESEE RD

City BURTON	State MI	Zip Code 48519-1420
----------------	-------------	------------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
10	/	30	/	2014

Transaction ID : SA11AI.141182

Amount of Each Receipt this Period

30.00

30.00

C. BOBBIE WEATHERFORD
Full Name (Last, First, Middle Initial)

Mailing Address 3084 S GENESEE RD

City BURTON	State MI	Zip Code 48519-1420
----------------	-------------	------------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2014

Transaction ID : SA11AI.142258

Amount of Each Receipt this Period

10.00

10.00

SUBTOTAL of Receipts This Page (optional).....▶	90.00
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 149 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11AI.141445

Amount of Each Receipt this Period
 18.00

B. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 228.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 13 / 2014
Transaction ID : SA11AI.142515

Amount of Each Receipt this Period
 24.00

C. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY 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
 11 / 17 / 2014
Transaction ID : SA11AI.141969

Amount of Each Receipt this Period
 24.00

SUBTOTAL of Receipts This Page (optional).....▶	66.00
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 150 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 276.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 17 / 2014
Transaction ID : SA11AI.142691

Amount of Each Receipt this Period
 24.00

B. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.142335

Amount of Each Receipt this Period
 12.00

C. JAMES WHISLER
Full Name (Last, First, Middle Initial)

Mailing Address 802 N HANOVER ST.

City POTTSTOWN State PA Zip Code 19464-4522

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

Name of Employer DANA CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 18 / 2014
Transaction ID : SA11AI.142516

Amount of Each Receipt this Period
 12.00

SUBTOTAL of Receipts This Page (optional).....▶	48.00
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 151 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. RONALD WHITEHEAD
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1302

City FRANKLIN State VA Zip Code 23851-9679

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

Name of Employer: KRAFT FOODS, INC Occupation: FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 16 / 2014
Transaction ID : SA11AI.141248

Amount of Each Receipt this Period
 50.00

B. RONALD WHITEHEAD
Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 1302

City FRANKLIN State VA Zip Code 23851-9679

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

Name of Employer: KRAFT FOODS, INC Occupation: FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 301.25

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 11 / 11 / 2014
Transaction ID : SA11AI.142317

Amount of Each Receipt this Period
 31.25

C. JAMES WIDEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2333 MARBURY WAY

City O FALLON State MO Zip Code 63366

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

Name of Employer: CHRYSLER LLC Occupation: FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141811

Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 231.25

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 152 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JAMES WIDEMAN
Full Name (Last, First, Middle Initial)

Mailing Address 2333 MARBURY WAY

City O FALLON State MO Zip Code 63366

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **650.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.141115

Amount of Each Receipt this Period
50.00

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

Mailing Address 6787 STAHELIN AVE

City DETROIT State MI Zip Code 48228-3464

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

Name of Employer INTERNATIONAL AUTO COMPONENTS Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 29 / 2014

Transaction ID : SA11AI.141259

Amount of Each Receipt this Period
60.00

C. MARGARET WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 139 LINKS LANE

City WATERLOO State IL Zip Code 62298

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **324.00**

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SA11AI.142750

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional).....▶	410.00
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 153 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. MARGARET WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 LINKS LANE
 City WATERLOO State IL Zip Code 62298
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation RETIRED
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 372.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.143366
 Amount of Each Receipt this Period
 48.00

B. MICHAEL WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 724 OAKLEY AVENUE
 City ROCKFORD State IL Zip Code 61101
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation FACTORY 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
 11 / 21 / 2014
Transaction ID : SA11AI.142532
 Amount of Each Receipt this Period
 30.00

C. W WILLIAMS
 Full Name (Last, First, Middle Initial)
 Mailing Address 139 LINKS LN
 City WATERLOO State IL Zip Code 62298-1588
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation FACTORY WORKER
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼ 350.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 10 / 30 / 2014
Transaction ID : SA11AI.141546
 Amount of Each Receipt this Period
 150.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 228.00
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 154 OF 183
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. W WILLIAMS
Full Name (Last, First, Middle Initial)

Mailing Address 139 LINKS LN

City WATERLOO State IL Zip Code 62298-1588

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
11 / 17 / 2014
Transaction ID : SA11AI.142261

Amount of Each Receipt this Period
50.00

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

Mailing Address 17600 PLAINVIEW

City DETROIT State MI Zip Code 48219

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

Name of Employer CHRYSLER LLC Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 670.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 30 / 2014
Transaction ID : SA11AI.141194

Amount of Each Receipt this Period
120.00

C. JOHN WRIGHT
Full Name (Last, First, Middle Initial)

Mailing Address 49474 WHISKEY LANE

City TICKFAW State LA Zip Code 70466

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014
Transaction ID : SA11AI.143187

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)..... ▶ 470.00

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 155 OF 183
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

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

Mailing Address 30851 NORTH RIVER RD

City HARRISON TWP	State MI	Zip Code 48045
----------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **625.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11AI.141284

Amount of Each Receipt this Period
120.00

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

Mailing Address 30851 NORTH RIVER RD

City HARRISON TWP	State MI	Zip Code 48045
----------------------	-------------	-------------------

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

Name of Employer CHRYSLER LLC	Occupation FACTORY WORKER
----------------------------------	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **685.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 21 / 2014

Transaction ID : SA11AI.141996

Amount of Each Receipt this Period
60.00

C. JEFFERY ZARISKE
Full Name (Last, First, Middle Initial)

Mailing Address 5613 FORT RD

City SAGINAW	State MI	Zip Code 48601-9315
-----------------	-------------	------------------------

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

Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER
--	------------------------------

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **350.00**

Date of Receipt
 M M / D D / Y Y Y Y Y Y
11 / 17 / 2014

Transaction ID : SA11AI.142207

Amount of Each Receipt this Period
150.00

SUBTOTAL of Receipts This Page (optional).....▶	330.00
TOTAL This Period (last page this line number only).....▶	42135.69

**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 156 OF 183
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. JPMORGAN CHASE
Full Name (Last, First, Middle Initial)
Mailing Address 611 WOODWARD

City DETROIT	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4440.48

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2014

Transaction ID : SA17.143560

Amount of Each Receipt this Period
335.37

INTEREST ON CHECKING

B. JPMORGAN CHASE
Full Name (Last, First, Middle Initial)
Mailing Address 611 WOODWARD

City DETROIT	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4444.03

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2014

Transaction ID : SA17.143561

Amount of Each Receipt this Period
3.55

INTEREST ON CHECKING

C. JPMORGAN CHASE
Full Name (Last, First, Middle Initial)
Mailing Address 611 WOODWARD

City DETROIT	State MI	Zip Code 48226
-----------------	-------------	-------------------

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

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4475.05

Date of Receipt

M M	/	D D	/	Y Y Y Y
10		31		2014

Transaction ID : SA17.143562

Amount of Each Receipt this Period
31.02

INTEREST ON CHECKING

SUBTOTAL of Receipts This Page (optional).....▶	369.94
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 157 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City State Zip Code
DETROIT MI 48226

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
4487.43

Date of Receipt
M M / D D / Y Y Y Y Y Y
10 / 31 / 2014
Transaction ID : SA17.143563

Amount of Each Receipt this Period
12.38

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)
B.

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

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

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

SUBTOTAL of Receipts This Page (optional).....▶	12.38
TOTAL This Period (last page this line number only).....▶	382.32

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

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

FOR LINE NUMBER: PAGE 158 OF 183
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
JOHN F TIERNEY

Mailing Address **21 SETTLER'S WAY**

City **SALEM** State **MA** Zip Code **01970**

FEC ID number of contributing federal political committee. **C H4MA06033**

Name of Employer Occupation

Receipt For: 2014
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
10 / 29 / 2014

Transaction ID : SA16.143559

Amount of Each Receipt this Period
5000.00

REFUND OF EXCESS CONTRIBUTION

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

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

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. ALLIED UNION SERVICES

Mailing Address 240 N. FENWAY DRIVE

City FENTON State MI Zip Code 48430

Purpose of Disbursement
ABSENTEE BALLOT PACKAGE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : **SB21B.140814**

Amount of Each Disbursement this Period

18085.00

Full Name (Last, First, Middle Initial)

B. AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement
VCAP WATCHES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : **SB21B.140821**

Amount of Each Disbursement this Period

1571.60

Full Name (Last, First, Middle Initial)

C. AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement
VCAP REPAIR WATCHES

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : **SB21B.140822**

Amount of Each Disbursement this Period

43.67

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

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

19700.27

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement
VCAP REPAIR WATCHES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

10 / 20 / 2014

Transaction ID : SB21B.140823

Amount of Each Disbursement this Period

25.37

Full Name (Last, First, Middle Initial)

B. AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement
V-CAP WATCHES

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

11 / 21 / 2014

Transaction ID : SB21B.140840

Amount of Each Disbursement this Period

2012.29

Full Name (Last, First, Middle Initial)

C. MARGARET BURSEY

Mailing Address 4708 LOIS N

City WICHITA FALLS State TX Zip Code 76306

Purpose of Disbursement
REG5 V-CAP AWARDS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

10 / 27 / 2014

Transaction ID : SB21B.140828

Amount of Each Disbursement this Period

250.00

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

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

2287.66

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
VCAP CAR MATS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB21B.140824

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
V-CAP SHIRTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB21B.140839

Amount of Each Disbursement this Period

126.50

Full Name (Last, First, Middle Initial)

C. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
V-CAP SHIRTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB21B.140841

Amount of Each Disbursement this Period

143.67

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

10270.17

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

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. DAN RODGERS SPORTING GOODS

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2014			

Mailing Address 5340 MONROE STREET

Transaction ID : **SB21B.140836**

City TOLEDO State OH Zip Code 43623

Amount of Each Disbursement this Period

1123.50

Purpose of Disbursement
VCAP JACKETS

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. DARRELL DURBIN

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			27			2014			

Mailing Address 20304 E 15TH TERRACE N

Transaction ID : **SB21B.140826**

City INDEPENDENCE State MO Zip Code 64056

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
REGION 5 V-CAP AWARDS

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. EVENTS 2000

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
10			29			2014			

Mailing Address 38650 MICHIGAN AVE

Transaction ID : **SB21B.140837**

City WAYNE State MI Zip Code 48184

Amount of Each Disbursement this Period

1745.41

Purpose of Disbursement
LEATHER VESTS VCAP

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

3368.91

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City WAYNE State MI Zip Code 48184

Purpose of Disbursement
VCAP LEATHER VESTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SB21B.140838

Amount of Each Disbursement this Period

1442.96

B. EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City WAYNE State MI Zip Code 48184

Purpose of Disbursement
VCAP LEATHER VESTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2014

Transaction ID : SB21B.140842

Amount of Each Disbursement this Period

1697.71

C. EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City WAYNE State MI Zip Code 48184

Purpose of Disbursement
LEATHER VESTS V-CAP

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
11 / 21 / 2014

Transaction ID : SB21B.140843

Amount of Each Disbursement this Period

951.38

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

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

4092.05

**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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. EVENTS 2000

Mailing Address 38650 MICHIGAN AVE

City WAYNE State MI Zip Code 48184

Purpose of Disbursement
LEATHER VESTS V-CAP

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : SB21B.140844

Amount of Each Disbursement this Period

291.50

Full Name (Last, First, Middle Initial)

B. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP T-SHIRTS/ ETC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB21B.140815

Amount of Each Disbursement this Period

11105.62

Full Name (Last, First, Middle Initial)

C. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP SHIRTS/ETC

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB21B.140816

Amount of Each Disbursement this Period

7113.66

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

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

18510.78

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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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP TSHIRTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SB21B.140818

Amount of Each Disbursement this Period

5056.20

Full Name (Last, First, Middle Initial)

B. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP JACKETS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SB21B.140819

Amount of Each Disbursement this Period

10735.63

Full Name (Last, First, Middle Initial)

C. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP SHIRTS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SB21B.140820

Amount of Each Disbursement this Period

334.96

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

16126.79

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

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

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

FOR LINE NUMBER:
(check only one)

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. IMPRESSIONS SPECIALTY ADVERTISING

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement
VCAP JACKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB21B.140835

Amount of Each Disbursement this Period

40444.38

Full Name (Last, First, Middle Initial)

B. KRISTA SZAFRANSKI

Mailing Address 01047 9326 FOLEY CROSSING

City FENTON State MI Zip Code 48430-9369

Purpose of Disbursement
V CAP WINDSHIELD REPAIR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB21B.140817

Amount of Each Disbursement this Period

380.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y

Amount of Each Disbursement this Period

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

40824.38

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

115181.01

**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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. 12TH CONGRESSIONAL DISTRICT DEMOCRATS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Mailing Address 19855 W OUTER DRIVE,
STE. 103 AE

Transaction ID : SB23.140878

City DEARBORN State MI Zip Code 48124

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. AL FRANKEN FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Mailing Address PO BOX 583144

Transaction ID : SB23.140882

City MINNEAPOLIS State MN Zip Code 55458

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District: 00

Full Name (Last, First, Middle Initial)

C. AMERICA'S LEADERSHIP PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		30		2014

Mailing Address 198-1/2 F STREET, SE

Transaction ID : SB23.140858

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

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

15000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. AMERICANS FOR GABRIEL ROTHBLATT

Mailing Address PO BOX 510136

City MELBOUNE BEACH State FL Zip Code 32951

Purpose of Disbursement CONTRIBUTION

Candidate Name **GABRIEL ROTHBLATT**

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Transaction ID : SB23.140862

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. APPEL FOR IOWA

Mailing Address PO BOX 702

City DES MOINES State IA Zip Code 50303

Purpose of Disbursement CONTRIBUTION

Candidate Name **STACI APPEL**

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify) ▼

State: IA District: 03

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SB23.140865

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. ARIZONA DEMOCRATIC PARTY

Mailing Address 2910 N. CENTRAL AVENUE

City PHOENIX State AZ Zip Code 85012

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014
 Primary General Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SB23.140845

Amount of Each Disbursement this Period

1000.00

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

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

9000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. BOB GOODRICH DEMOCRAT FOR CONGRESS

Mailing Address 4417 BROADMOOR SE

City GRAND RAPIDS State MI Zip Code 49512

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BOB GOODRICH

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.140880

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT MICHELLE LUJAN

Mailing Address PO BOX 25422

City ALBUQUERQUE State MN Zip Code 87125

Purpose of Disbursement
CONTRIBUTION

Candidate Name

MICHELLE LUJAN GRISHAM

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB23.140886

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. CONNIE JOHNSON FOR OKLAHOMA

Mailing Address PO BOX 57196

City OKLAHOMA CITY State OK Zip Code 73157

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CONSTANCE NEVLIN JOHNSON

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OK District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB23.140890

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. DEBBIE DINGELL FOR CONGRESS

Mailing Address 5208 ROYAL VALE LANE

City DEARBORN State MI Zip Code 48126

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DEBBIE DINGELL

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.140876

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. DIANA DEGETTE FOR CONGRESS

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013-5214

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DIANA L DEGETTE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.140854

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ELIZABETH ESTY

Mailing Address PO BOX 61

City CHESHIRE State CT Zip Code 06410

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ELIZABETH ESTY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CT District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB23.140856

Amount of Each Disbursement this Period

5000.00

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

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

11000.00

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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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. FRIENDS OF FARR

Mailing Address 227 MASSACHUSETTS AVE, NE
SUITE 302

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name
SAM FARR

Office Sought: House
 Senate
 President
State: CA District: 17

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 21 / 2014

Transaction ID : SB23.140849

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MARY LANDRIEU

Mailing Address 700 13TH ST., NW, STE. 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name
MARY L LANDRIEU

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

Disbursement For: 2014
 Primary General
 Other (specify) ▼ Runoff

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
11 / 13 / 2014

Transaction ID : SB23.140869

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF WESLEY REED

Mailing Address PO BOX 2611

City CORPUS CHRISTI State TX Zip Code 78403

Purpose of Disbursement
CONTRIBUTION

Candidate Name
WESLEY CRAIG REED

Office Sought: House
 Senate
 President
State: TX District: 27

Disbursement For: 2014
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 23 / 2014

Transaction ID : SB23.140897

Amount of Each Disbursement this Period

1000.00

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. HENRY LAWRENCE FOR CONGRESS

Mailing Address PO BOX 1235

City HOLMES BEACH State FL Zip Code 34218

Purpose of Disbursement
CONTRIBUTION

Candidate Name

HENRY LAWRENCE

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 16

Date of Disbursement

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

Transaction ID : SB23.140864

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. HIGGINS FOR CONGRESS

Mailing Address PO BOX 28

City BUFFALO State NY Zip Code 14220

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BRIAN HIGGINS

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NY District: 27

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		2	9		2	0	1	4

Transaction ID : SB23.140889

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. JEFF MERKLEY FOR OREGON

Mailing Address PO BOX 29136

City PORTLAND State OR Zip Code 97296

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JEFFREY ALAN MERKLEY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 00

Date of Disbursement

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

Transaction ID : SB23.140892

Amount of Each Disbursement this Period

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

8	5	0	0	.	0	0
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TOTAL This Period (last page this line number only)..... ▶

8	5	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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. KEITH ELLISON FOR CONGRESS

Mailing Address PO BOX 11818

City MINNEAPOLIS State MN Zip Code 56002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

KEITH MAURICE ELLISON

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MN District: 05

Date of Disbursement

M	M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
1	0			2	9			2	0	1	4	

Transaction ID : SB23.140883

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

B. KOLLER FOR CONGRESS

Mailing Address PO BOX 3683

City OCALA State FL Zip Code 34478

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DAVID C KOLLER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: FL District: 11

Date of Disbursement

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

Transaction ID : SB23.140860

Amount of Each Disbursement this Period

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

Full Name (Last, First, Middle Initial)

C. KURT SCHRADER FOR CONGRESS

Mailing Address 607 N. MAIN ST., SUITE 240

City OREGON CITY State OR Zip Code 97045

Purpose of Disbursement
CONTRIBUTION

Candidate Name

KURT SCHRADER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: OR District: 05

Date of Disbursement

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

Transaction ID : SB23.140891

Amount of Each Disbursement this Period

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

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

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

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

1	1	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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. LENDA SHERRELL FOR CONGRESS

Mailing Address PO BOX 330767

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement CONTRIBUTION

Candidate Name

LEND A SHERRELL

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: TN District: 04

Date of Disbursement

MM / DD / YYYY
10 / 23 / 2014

Transaction ID : SB23.140895

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. LOUISIANA DEMOCRATIC PARTY

Mailing Address PO BOX 4385

City BATON ROUGE State LA Zip Code 70821

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼ Runoff

State: District:

Date of Disbursement

MM / DD / YYYY
11 / 13 / 2014

Transaction ID : SB23.140871

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. MARKEY COMMITTEE

Mailing Address PO BOX 526

City MEDORD State MA Zip Code 02155

Purpose of Disbursement CONTRIBUTION

Candidate Name

EDWARD MARKEY

Office Sought: House Senate President

Disbursement For: 2014 Primary General Other (specify) ▼

State: MA District:

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SB23.140874

Amount of Each Disbursement this Period

2500.00

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

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

10000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. MARYLAND DEMOCRATIC PARTY

Mailing Address 188 MAIN STREET - SUITE 1

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 28 / 2014

Transaction ID : SB23.140875

Amount of Each Disbursement this Period

5000.00

B. MATSUI FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address 729 15TH STREET, N.W.
SUITE 300

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DORIS MATSUI

Office Sought: House Senate President
State: CA District: 05

Disbursement For: 2014 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2014

Transaction ID : SB23.140850

Amount of Each Disbursement this Period

1000.00

C. MC NERNEY FOR CONGRESS

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 12022

City PLEASANTON State CA Zip Code 94588

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JERRY MCNERNEY

Office Sought: House Senate President
State: CA District: 11

Disbursement For: 2014 Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2014

Transaction ID : SB23.140848

Amount of Each Disbursement this Period

1000.00

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

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

7000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. PELOSI FOR CONGRESS

Mailing Address 1 BUSH ST SUITE 250

City State Zip Code
SAN FRANCISCO CA 94104

Purpose of Disbursement
CONTRIBUTION

Candidate Name

NANCY PELOSI

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 08

Date of Disbursement

MM / DD / YYYY
10 / 31 / 2014

Transaction ID : SB23.140852

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. PEOPLE FOR BEN LUJAN

Mailing Address 422 C STREET, NE LOWER LEVEL

City State Zip Code
WASHINGTON DC 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BEN LUJAN

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 03

Date of Disbursement

MM / DD / YYYY
10 / 21 / 2014

Transaction ID : SB23.140888

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PEOPLE FOR WEILAND

Mailing Address PO BOX 222

City State Zip Code
MADISON SD 57042

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RICHARD PAUL WEILAND

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: SD District: 00

Date of Disbursement

MM / DD / YYYY
10 / 29 / 2014

Transaction ID : SB23.140893

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. PERLMUTTER FOR CONGRESS

Mailing Address 2545 YOUNGFIELD ST.

City GOLDEN State CO Zip Code 80401

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ED PERLMUTTER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.140855

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RICHMOND FOR CONGRESS

Mailing Address 499 SOUTH CAPITOL ST.,
SW SUITE 422

City WAHSINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CEDRIC L. RICHMOND

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: LA District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.140867

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCHERTZING FOR CONGRESS

Mailing Address 236 KEDZIE STREET

City EAST LANSING State MI Zip Code 48823

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ERIC ANTHONY SCHERTZING

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MI District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.140881

Amount of Each Disbursement this Period

2500.00

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

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

4500.00

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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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. SCHNEIDER FOR CONGRESS

Mailing Address 487 MEADOWLARK DRIVE

City SARASOTA State FL Zip Code 34236

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BRADLEY SCOTT SCHNEIDER

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB23.140866

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. SECURE PAC

Mailing Address 236 MASSACHUSETTS AVE.
NE #508

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.140857

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. SOUTH DAKOTA DEMOCRATIC PARTY

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		29		2014

Transaction ID : SB23.140894

Amount of Each Disbursement this Period

5000.00

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

10000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. TED LIEU FOR CONGRESS

Mailing Address PO BOX 1309

City TORRANCE State CA Zip Code 90505

Purpose of Disbursement
CONTRIBUTION

Candidate Name

TED LIEU

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: CA District: 33

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB23.140847

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. UDALL FOR US ALL

Mailing Address PO BOX 25766

City ALBUQUERQUE State NM Zip Code 87125

Purpose of Disbursement
CONTRIBUTION

Candidate Name

TOM UDALL

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: NM District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Transaction ID : SB23.140887

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. WILLIAM CLAY, JR FOR CONGRESS

Mailing Address PO BOX 3146

City ST LOUIS State MO Zip Code 63130

Purpose of Disbursement
CONTRIBUTION

Candidate Name

WILLIAM LACY JR CLAY

Office Sought: House
 Senate
 President

Disbursement For: 2014
 Primary General
 Other (specify) ▼

State: MO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : SB23.140884

Amount of Each Disbursement this Period

5000.00

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

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

11000.00

133000.00

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO REDUCE INCOME INEQUALITY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		17		2014

Mailing Address 534 S. SECOND, SUITE 200

Transaction ID : SB29.140899

City Springfield State IL Zip Code 62701

Amount of Each Disbursement this Period

150000.00

Purpose of Disbursement CONTRIBUTION

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC MAJORITY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address PO BOX 610

Transaction ID : SB29.140900

City Springfield State IL Zip Code 62705

Amount of Each Disbursement this Period

52600.00

Purpose of Disbursement CONTRIBUTION

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC PARTY OF ILLINOIS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		20		2014

Mailing Address PO BOX 176

Transaction ID : SB29.140903

City CRETE State IL Zip Code 60417

Amount of Each Disbursement this Period

52600.00

Purpose of Disbursement CONTRIBUTION

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

255200.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. FRIENDS OF MICHAEL J. MADIGAN		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address PO BOX 610		Transaction ID : SB29.140905
City SPRINGFIELD	State IL	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 94800.00
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: IL	District: 22	

Full Name (Last, First, Middle Initial) B. IL STATE PAC FUND		Date of Disbursement MM / DD / YYYY 10 / 21 / 2014
Mailing Address 680 BARCLAY BOULEVARD		Transaction ID : SB29.140906
City LINCOLNSHIRE	State IL	
Purpose of Disbursement REPLENISHMENT	Candidate Name	Amount of Each Disbursement this Period 25000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

Full Name (Last, First, Middle Initial) C. LONE STAR PAC		Date of Disbursement MM / DD / YYYY 10 / 20 / 2014
Mailing Address 6 E. STRET, SE		Transaction ID : SB29.140904
City WASHINGTON	State DC	
Purpose of Disbursement CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 25000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	94800.00
TOTAL This Period (last page this line number only).....▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. SOUTH DAKOTA DEMOCRATIC PARTY

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 30 / 2014

Transaction ID : SB29.140907

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. UAW REGION 5 PAC

Mailing Address 721 DUNN ROAD

City HAZELWOOD State MO Zip Code 63042

Purpose of Disbursement
REPLENISHMENT

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 20 / 2014

Transaction ID : SB29.140901

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY

Amount of Each Disbursement this Period

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

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

30000.00

380000.00