

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines  
The Society of the Plastics Industry, Inc. Political Action Committee

ADDRESS (number and street) 1667 K Street, NW  
Suite 1000  
 Check if different than previously reported. (ACC)  
Washington DC 20006

2. **FEC IDENTIFICATION NUMBER** C00309716  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

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

5. Covering Period 07 01 2009 through 12 31 2009

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.  
Type or Print Name of Treasurer Mr. Jonathan Kurrle

Signature of Treasurer Electronically Filed by Mr. Jonathan Kurrle Date 01 28 2010

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

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

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
The Society of the Plastics Industry, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		5601.31
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	13961.00									
(c) Total Receipts (from Line 19) .....	9645.00	18495.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	23606.00	24096.31								
7. Total Disbursements (from Line 31) .....	4655.53	5145.84								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	18950.47	18950.47								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

The Society of the Plastics Industry, Inc. Political Action Committee

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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) .....	8935.00	17135.00
(ii) Unitemized .....	710.00	1360.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	9645.00	18495.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	9645.00	18495.00
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	9645.00	18495.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	9645.00	18495.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	455.53	945.84
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	455.53	945.84
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4200.00	4200.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	0.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4655.53	5145.84
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4655.53	5145.84

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	9645.00	18495.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	9645.00	18495.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	455.53	945.84
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	455.53	945.84

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 21  
(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<p><b>A.</b> Full Name (Last, First, Middle Initial) Mr. Paul Appelblom</p> <p>Mailing Address 725 Zwissig Way</p> <p>City State Zip Code <u>Union City</u> CA 94587</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Jatco Incorporated President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1550.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 07 / 06 / 2009</p> <p><b>Transaction ID:</b> SA11AI.4353</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">300.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) Mr. Paul Appelblom</p> <p>Mailing Address 725 Zwissig Way</p> <p>City State Zip Code <u>Union City</u> CA 94587</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Jatco Incorporated President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">1800.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 08 / 06 / 2009</p> <p><b>Transaction ID:</b> SA11AI.4354</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) Mr. Paul Appelblom</p> <p>Mailing Address 725 Zwissig Way</p> <p>City State Zip Code <u>Union City</u> CA 94587</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation Jatco Incorporated President</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">2050.00</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span> 09 / 06 / 2009</p> <p><b>Transaction ID:</b> SA11AI.4355</p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">250.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">800.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 21  
(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Paul Appelblom

Mailing Address 725 Zwissig Way

City State Zip Code  
Union City CA 94587

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

Name of Employer Occupation  
Jatco Incorporated President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2300.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 0 6 / 2 0 0 9

**Transaction ID:** SA11AI.4356

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Paul Appelblom

Mailing Address 725 Zwissig Way

City State Zip Code  
Union City CA 94587

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

Name of Employer Occupation  
Jatco Incorporated President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2550.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 6 / 2 0 0 9

**Transaction ID:** SA11AI.4357

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Paul Appelblom

Mailing Address 725 Zwissig Way

City State Zip Code  
Union City CA 94587

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

Name of Employer Occupation  
Jatco Incorporated President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 2800.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 6 / 2 0 0 9

**Transaction ID:** SA11AI.4358

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **750.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 21
	<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell		Date of Receipt	
	Mailing Address 420 Lexington Ave. Suite 2525		M M / D D / Y Y Y Y Y 08 / 08 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4335
	New York	NY	10170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
	Name of Employer Kureha America Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 250.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell		Date of Receipt	
	Mailing Address 420 Lexington Ave. Suite 2525		M M / D D / Y Y Y Y Y 09 / 08 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4336
	New York	NY	10170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
	Name of Employer Kureha America Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell		Date of Receipt	
	Mailing Address 420 Lexington Ave. Suite 2525		M M / D D / Y Y Y Y Y 10 / 08 / 2009	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4337
	New York	NY	10170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
	Name of Employer Kureha America Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	150.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 21
	<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell		Date of Receipt	
	Mailing Address 420 Lexington Ave. Suite 2525		M M / D D / Y Y Y Y Y 1 1 / 0 8 / 2 0 0 9	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4338
	New York	NY	10170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
	Name of Employer Kureha America Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

<b>B.</b>	Full Name (Last, First, Middle Initial) Mr. Fred Daniell		Date of Receipt	
	Mailing Address 420 Lexington Ave. Suite 2525		M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 9	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4339
	New York	NY	10170	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		50.00	
	Name of Employer Kureha America Inc.		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00		

<b>C.</b>	Full Name (Last, First, Middle Initial) Mr. A. Wayne Gibson		Date of Receipt	
	Mailing Address 6235 N. 650 E.		M M / D D / Y Y Y Y Y 1 2 / 0 8 / 2 0 0 9	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.4312
	Churubusco	IN	46723	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		85.00	
	Name of Employer Pro Systems, LLC		Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 255.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	185.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. James Gustafson

Mailing Address 1260 Kingsland Dr.

City State Zip Code  
Batavia IL 60510

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

Name of Employer: Innovative Plastech, Inc. Occupation: President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 03 / 2009  
Transaction ID: SA11AI.4340  
Amount of Each Receipt this Period: 500.00

**B.** Full Name (Last, First, Middle Initial)  
Ms Jean Hall

Mailing Address 920 Milliken Rd.  
M-209

City State Zip Code  
Spartanburg SC 29304

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

Name of Employer: Milliken & Co. Occupation: Business Manager Plastic Additives

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 24 / 2009  
Transaction ID: SA11AI.4342  
Amount of Each Receipt this Period: 500.00

**C.** Full Name (Last, First, Middle Initial)  
Dr. Robert Janeczko

Mailing Address 2360 Grand Ave

City State Zip Code  
West Des Moines IA 50265-5731

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

Name of Employer: Innovative Injection Tech. Occupation: President & CEO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 10 / 22 / 2009  
Transaction ID: SA11AI.4360  
Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1500.00

**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 / 21  
(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Peter Jones

Mailing Address 1015 Dillard Dr.  
P.O. Box 4297

City Lynchburg State VA Zip Code 24502

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

Name of Employer Wexco Corporation Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 22 / 2009

Transaction ID: SA11AI.4359

Amount of Each Receipt this Period: 100.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Christopher Keller

Mailing Address 200 West Kensinger Drive

City Cranberry Township State PA Zip Code 16066

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

Name of Employer The Conair Group, Inc. Occupation President & COO

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 23 / 2009

Transaction ID: SA11AI.4330

Amount of Each Receipt this Period: 250.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Roger Klouda

Mailing Address 12300 6th St SW

City Cedar Rapids State IA Zip Code 52404-9141

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

Name of Employer MSI Mold Builders Occupation President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 10 / 26 / 2009

Transaction ID: SA11AI.4361

Amount of Each Receipt this Period: 500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **850.00**

**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 / 21  
(check only one)  
 11a  11b  11c  12  
 13  14  15  16  17

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NAME OF COMMITTEE (In Full)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.** Full Name (Last, First, Middle Initial)  
Mr. Alois Koller, Jr.  
Mailing Address P.O. Box 718  
City Fenton State MO Zip Code 63026-0718  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Koller Craft Plastic Products Occupation Chairman  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00  
Date of Receipt 10 / 22 / 2009  
Transaction ID: SA11AI.4326  
Amount of Each Receipt this Period 500.00

**B.** Full Name (Last, First, Middle Initial)  
Mr. Jonathan Kurrle  
Mailing Address 1667 K Street, NW Suite 1000  
City Washington State DC Zip Code 20006  
FEC ID number of contributing federal political committee. **C**  
Name of Employer SPI Occupation Vice President, Government Affairs  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 2000.00  
Date of Receipt 07 / 10 / 2009  
Transaction ID: SA11AI.4345  
Amount of Each Receipt this Period 1000.00

**C.** Full Name (Last, First, Middle Initial)  
Mr. James Mason  
Mailing Address 11301 Superfos Drive, SE  
City Cumberland State MD Zip Code 21502  
FEC ID number of contributing federal political committee. **C**  
Name of Employer Superfos Packaging, Inc. Occupation President  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 250.00  
Date of Receipt 07 / 28 / 2009  
Transaction ID: SA11AI.4341  
Amount of Each Receipt this Period 250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1750.00  
**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 13 / 21

(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Ms Jessine Monaghan

Mailing Address 1310 G Street NW  
Suite 770

City State Zip Code  
Washington DC 20005

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

Name of Employer Occupation  
Sabic Innovative Plastics Manager & Sr. Counsel Government Relat

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

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.4343

Amount of Each Receipt this Period  
250.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. John Moyer

Mailing Address 900 E. Van Riper Road

City State Zip Code  
Fowlerville MI 48836

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

Name of Employer Occupation  
Asahi Kasei Plastics, N.A. President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 700.00

Date of Receipt

M M / D D / Y Y Y Y  
0 7 / 0 6 / 2 0 0 9

Transaction ID: SA11AI.4344

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
Mr. Stephen Petrakis

Mailing Address 21020 N Rand Rd.  
Suite A

City State Zip Code  
Lake Zurich IL 60047-3006

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

Name of Employer Occupation  
Frigel North America, Inc. President

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y  
1 0 / 2 2 / 2 0 0 9

Transaction ID: SA11AI.4362

Amount of Each Receipt this Period  
500.00

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

950.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 21  
(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)  
Mr. Robert Render

Mailing Address 1817 Kenosha Road

City State Zip Code  
Zion IL 60099

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

Name of Employer Occupation  
Maine Plastics President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
12 / 01 / 2009

**Transaction ID:** SA11AI.4332

Amount of Each Receipt this Period  
500.00

**B.**

Full Name (Last, First, Middle Initial)  
Mr. Wylie Royce

Mailing Address 35 Carlton Ave.

City State Zip Code  
East Rutherford NJ 07073-1613

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

Name of Employer Occupation  
Royce Associates Vice President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
10 / 23 / 2009

**Transaction ID:** SA11AI.4364

Amount of Each Receipt this Period  
500.00

**C.**

Full Name (Last, First, Middle Initial)  
Ms Maureen Steinwall

Mailing Address 1759 116th Ave NW

City State Zip Code  
Coon Rapids MN 55448

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

Name of Employer Occupation  
Steinwall, Inc. President

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

Date of Receipt  
MM / DD / YYYY  
07 / 01 / 2009

**Transaction ID:** SA11AI.4346

Amount of Each Receipt this Period  
100.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1100.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 21  
(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Ms Maureen Steinwall		Date of Receipt MM / DD / YYYY 07 / 28 / 2009	
Mailing Address 1759 116th Ave NW		<b>Transaction ID:</b> SA11AI.4348	
City Coon Rapids	State MN	Zip Code 55448	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Steinwall, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 700.00		

**B.**

Full Name (Last, First, Middle Initial) Ms Maureen Steinwall		Date of Receipt MM / DD / YYYY 08 / 26 / 2009	
Mailing Address 1759 116th Ave NW		<b>Transaction ID:</b> SA11AI.4349	
City Coon Rapids	State MN	Zip Code 55448	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Steinwall, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 800.00		

**C.**

Full Name (Last, First, Middle Initial) Ms Maureen Steinwall		Date of Receipt MM / DD / YYYY 09 / 24 / 2009	
Mailing Address 1759 116th Ave NW		<b>Transaction ID:</b> SA11AI.4350	
City Coon Rapids	State MN	Zip Code 55448	Amount of Each Receipt this Period 100.00
FEC ID number of contributing federal political committee. C			
Name of Employer Steinwall, Inc.	Occupation President		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 21
	(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)  
The Society of the Plastics Industry, Inc. Political Action Committee

**A.**

Full Name (Last, First, Middle Initial) Ms Maureen Steinwall		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 1759 116th Ave NW		<b>Transaction ID:</b> SA11AI.4351
City Coon Rapids	State MN	Zip Code 55448
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 100.00	
Name of Employer Steinwall, Inc.	Occupation President	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

**B.**

Full Name (Last, First, Middle Initial) Mr. Efthimios Stojka		Date of Receipt MM / DD / YYYY 10 / 29 / 2009
Mailing Address 776 N Oaklawn Ave		<b>Transaction ID:</b> SA11AI.4333
City Elmhurst	State IL	Zip Code 60126-1406
FEC ID number of contributing federal political committee. <b>C</b>	Amount of Each Receipt this Period 500.00	
Name of Employer Fast Heat, Inc.	Occupation CEO	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	600.00
<b>TOTAL</b> This Period (last page this line number only) .....	8935.00



# 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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Suntrust Bank</p> <p>Mailing Address P.O. Box 622227</p> <p>City Orlando State FL Zip Code 32862-2227</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4375</p> <p>Date of Disbursement 11 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 22.06</p> <p>Category/Type</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Suntrust Bank</p> <p>Mailing Address P.O. Box 622227</p> <p>City Orlando State FL Zip Code 32862-2227</p> <p>Purpose of Disbursement Account Analysis Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4376</p> <p>Date of Disbursement 12 / 18 / 2009</p> <p>Amount of Each Disbursement this Period 18.44</p> <p>Category/Type</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) SunTrust Merchant Services</p> <p>Mailing Address P.O. Box 6600</p> <p>City Hagerstown State MD Zip Code 21741</p> <p>Purpose of Disbursement Account Fee</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB21B.4378</p> <p>Date of Disbursement 07 / 10 / 2009</p> <p>Amount of Each Disbursement this Period 21.23</p> <p>Category/Type</p>

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

61.73

**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)

PAGE 18 / 21

<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b>	Full Name (Last, First, Middle Initial) SunTrust Merchant Services  Mailing Address P.O. Box 6600  City Hagerstown State MD Zip Code 21741  Purpose of Disbursement Account Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4379 <b>Date of Disbursement</b> 08 / 10 / 2009	Amount of Each Disbursement this Period 63.36
<b>B.</b>	Full Name (Last, First, Middle Initial) SunTrust Merchant Services  Mailing Address P.O. Box 6600  City Hagerstown State MD Zip Code 21741  Purpose of Disbursement Account Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4380 <b>Date of Disbursement</b> 09 / 10 / 2009	Amount of Each Disbursement this Period 8.25
<b>C.</b>	Full Name (Last, First, Middle Initial) SunTrust Merchant Services  Mailing Address P.O. Box 6600  City Hagerstown State MD Zip Code 21741  Purpose of Disbursement Account Fee Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB21B.4381 <b>Date of Disbursement</b> 10 / 13 / 2009	Amount of Each Disbursement this Period 46.43

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>118.04</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 21

<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

A.

Full Name (Last, First, Middle Initial)  
SunTrust Merchant Services

Transaction ID: SB21B.4382  
Date of Disbursement

Mailing Address P.O. Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	0		2	0	0	9

City Hagerstown State MD Zip Code 21741

Amount of Each Disbursement this Period

98.22
-------

Purpose of Disbursement  
Account Fee  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

B.

Full Name (Last, First, Middle Initial)  
SunTrust Merchant Services

Transaction ID: SB21B.4383  
Date of Disbursement

Mailing Address P.O. Box 6600

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	0		2	0	0	9

City Hagerstown State MD Zip Code 21741

Amount of Each Disbursement this Period

63.12
-------

Purpose of Disbursement  
Account Fee  
Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

161.34
--------

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

341.11
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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)  
The Society of the Plastics Industry, Inc. Political Action Committee

A.	Full Name (Last, First, Middle Initial) DAVID VITTER FOR US SENATE	Transaction ID: SB23.4395
	Mailing Address PO BOX 8175	Date of Disbursement 12 / 17 / 2009
	City METAIRIE State LA Zip Code 70011	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name DAVID VITTER	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) GALYEAN FOR CONGRESS	Transaction ID: SB23.4392
	Mailing Address 3300 N Main Street Suite D PMB-301	Date of Disbursement 07 / 30 / 2009
	City Anderson State SC Zip Code 29621	Amount of Each Disbursement this Period 200.00
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name Mr. JAMES D GALYEAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 03	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) NELSON 2012	Transaction ID: SB23.4393
	Mailing Address PO BOX 8666	Date of Disbursement 12 / 09 / 2009
	City OMAHA State NE Zip Code 68108	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution	Category/Type
	Candidate Name E BENJAMIN NELSON	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NE District: 00	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	2200.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<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)  
The Society of the Plastics Industry, Inc. Political Action Committee

<b>A.</b> Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC. <hr/> Mailing Address P.O. BOX 40233 P.O. BOX 40233 <hr/> City FORT WAYNE State IN Zip Code 46804 <hr/> Purpose of Disbursement Contribution Candidate Name MARK E SOUDER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4394 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
<b>B.</b> Full Name (Last, First, Middle Initial) VOLUNTEERS FOR SHIMKUS <hr/> Mailing Address PO Box 5458 PO BOX 5458 <hr/> City Springfield State IL Zip Code 62705 <hr/> Purpose of Disbursement Contribution Candidate Name JOHN M SHIMKUS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.4396 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 0 6 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00

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

2000.00

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

4200.00