REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

1. NAME OF COMMITTEE (in full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

ADDRESS (number and street) [ ] Check if different than previously reported

5201 AUTH WAY

CITY, STATE and ZIP CODE

CAMP SPRINGS, MARYLAND 20746

RECEIVED
FEDERAL ELECTION
COMMISSION MAIL ROOM

2. FEC IDENTIFICATION NUMBER
C00004325

3. [ ] This committee has qualified as a multicand committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) [ ] April 15 Quarterly Report

[ ] July 15 Quarterly Report

[ ] October 15 Quarterly Report

[ ] January 31 Year End Report

[ ] July 31 Mid Year Report (Non-election Year Only)

[ ] Termination Report

Monthly Report Due On:

[ ] February 20	[ ] June 20	[ ] October 20
[ ] March 20	[ ] July 20	[ ] November 20
[ ] April 20	[ ] August 20	[ ] December 20
[X] May 20	[ ] September 20	[ ] January 31

[ ] Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____.

[ ] Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? [ ] YES [X] NO

SUMMARY

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period 4/1/00 through 4/30/00		
6. (a) Cash on Hand January 2000		$ 214,550.92
(b) Cash on Hand at Beginning of Reporting Period	$ 196,079.23	
(c) Total Receipts (from line 10)	$ 42,682.49	$ 247,089.68
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 238,761.72	$ 461,640.60
7. Total Disbursements (from Line 30)	$ 41,597.72	$ 264,476.60
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 197,164.00	$ 197,164.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ -0-	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
MARGARET R. BOWEN

Signature of Treasurer
Margaret R. Bowen

Date
05/17/00

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

FEC FO

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIND

REPORT COVERING PERIOD
FROM: 4/1/00 TO: 9/30/00

	COLUMN A Total This Period	COLUMN B Calendar Year
I. Receipts		
11. Contributions (other than loans) From:		
a. Individuals/Persons Other Than Political Committees		
i. Itemized (use Schedule A)	3,698.50	19,294.60
ii. Unitemized	38,656.40	218,864.30
iii. Total (add i and ii)	42,354.90	238,158.90
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c)	42,354.90	238,158.90
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)	-0-.	112.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	-0-.	7,250.00
17. Other Federal Receipts (Dividends, Interest, etc.)	327.59	1,568.78
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18)	42,682.49	247,089.68
20. Total Federal Receipts (subtract line 18 from line 19)	42,682.49	247,089.68
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	14,997.72	53,376.60
c. Total Operating Expenditures (Add a i, a ii, and b)	14,997.72	53,376.60
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	23,500.00	154,500.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (Add a, b and c)		
29. Other Disbursements	3,100.00	56,600.00
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29)	41,597.72	264,476.60
31. Total Federal Disbursements (subtract line 21 a ii from line 30)	41,597.72	264,476.60
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans)(from line 11d)	42,354.90	238,158.90
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans)(subtract line 33 from 32)	42,354.90	238,158.90
35. Total Federal Operating Expenditures (add 21 a i and 21 b)	14,997.72	53,376.60
36. Offsets to Operating Expenditures (from line 15)	-0-.	112.00
37. Net Operating Expenditures (subtract line 36 from 35)	14,997.72	53,264.60

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 3

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWO

FEC ID No. C00004325

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month day, year)	Amount of Each Receipt this Period
A. JORGE BONELLI 4309 COLCHESTER DRIVE KENSINGTON, MD 20895 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 312.50	04/30/00	312.50
B. ENER CARLOS 2508 PERRY AVENUE BREMERTON, WA 98310 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 274.00	04/30/00	274.00
C. RICHARD DATSLEY 635 FOURTH AVENUE BROOKLYN, NY 11232 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 253.00	04/30/00	253.00
D. MOHAMED ELJAHMI P.O. BOX 27384 HONOLULU, HI 96827 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 241.00	04/30/00	241.00
E. ALI HUSSEIN P.O. BOX 28026 HONOLULU, HI 96827 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 233.00	04/30/00	233.00
F. SYED IQBAL APT 205, 925 HGWY. AIRN MELBOURNE, FL 32903 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 205.50	04/30/00	205.50
G. JAMES KEEVAN 4301 WEST RANCHVIEW RD. AMARILLO, TX 79124 Receipt for: Primary General Other (specify):	VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 267.00	04/30/00	267.00

SUBTOTAL of Receipts This Page (optional) 1,786.00

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

SCHEDULE A **ITEMIZED RECEIPTS**

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PAGE 2 OF 3

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

Full Name, Mailing Address and ZIP Code	Name of Employer / Occupation	Date (month, day, year)	Amount of Each Receipt this Period
A. WILLIAM ENDRR P.O. BOX 206 VALLEY LEE, MD 20692 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 215.00	04/30/00	215.00
B. WILLIAM KOVACS 33 CEDAR STREET FARMINGDALE, NY Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 231.00	04/30/00	231.00
C. GEORGE MACALUSA 3064 DAMASCUS TRAIL VIRGINIA BEACH, VA 23456 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 228.00	04/30/00	228.00
D. WILLIAM OSBORN 2828 LELAND DRIVE JACKSON, MI 49203 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: BAY SHIP BELLATRIX Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 286.50	04/30/00	286.50
E. RANDELL PORTER 5866 MARTIN LUTHER KING DR. JACKSONVILLE, FL 32219 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 211.00	04/30/00	211.00
F. WILLIE SMITH 3247 LANSDELL DRIVE JACKSONVILLE, FL 32208 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 233.00	04/30/00	233.00
G. DUANE WASHINGTON 10443 BISCAYNE BLVD. JACKSONVILLE, FL 32218 Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer: VARIOUS - US FLAG VESSEL OPERATORS Occupation: MERCHANT SEAMAN Aggregate Year-To-Date $ 258.00	04/30/00	258.00

SUBTOTAL of Receipts This Page (optional)	1,662.50
TOTAL This Period (last page this line number only)	

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 3 OF 3

FOR LINE NUMBER 11ai

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code CAROLYN GENTILE 451-453 PARK AVENUE SO. 2N FL NEW YORK, NY 10016	SEAFARERS VACATION PLAN	04/30/00	250.00
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation HOUSE COUNCIL		
	Aggregate Year-To-Date $	250.00	
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month, day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		

SUBTOTAL of Receipts This Page (optional)	250.00
TOTAL This Period (last page this line number only)	3,698.50

SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 17

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWC

FEC ID No. C00004325

	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
A. Full Name, Mailing Address and ZIP Code FARMERS BANK OF MARYLAND 4710 AUTH PLACE CAMP SPRINGS, MD 20746	INTEREST - MONEY MARKET ACCOUNT	04/30/00	327.59
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $ 1,568.78		
B. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
C. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
D. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
E. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
F. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		
G. Full Name, Mailing Address and ZIP Code	Name of Employer	Date (month day, year)	Amount of Each Receipt this Period
Receipt for: ☐ Primary ☐ General ☐ Other (specify):	Occupation		
	Aggregate Year-To-Date $		

SUBTOTAL of Receipts This Page (optional)	327.59
TOTAL This Period (last page this line number only)	327.59

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 2

FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID NO. C00004325

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General / Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. ROBERT McGLOTTEN 1901 L ST., NW, SUITE 300 WASHINGTON, DC 20036	POLITICAL ANALYST	04/01/00	5,500.00
B. G. WAYNE SMITH 816 CONNECTICUT AVE., NW WASHINGTON, DC 20006	POLITICAL ANALYST	04/01/00	2,500.00
C. BELL ATLANTIC MOBILE P.O. BOX 4009 SILVER SPRING, MD 20914	PHONE CHARGES	04/03/00	225.05
D. NATIONAL DEMOCRATIC CLUB 30 IVY STREET WASHINGTON, DC 20003-4071	CLUB CHARGES	04/19/00	427.91
E. GNOSSOS SOFT WARE 1625 K ST., NW, SUITE 1250 WASHINGTON, DC 20006-1604	SOFTWARE PACKAGE	04/12/00	6,000.00
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) 14,652.96

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

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary General / Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. MBNA AMERICA BUSINESS CARD P.O. BOX 15469 WILMINGTON, DE 19886	MONTHLY CREDIT CARD	04/19/00	5.05 FINANCE CHG.
B. SAM & HARRY'S VIENNA, VA	LEGISLATIVE DISCUSSION	02/22/00	63.50
C. TEQUILA GRANDE VIENNA, VA	LEGISLATIVE DISCUSSION	02/28/00	16.65
D. THE PALM RESTAURANT WASHINGTON, DC	LEGISLATIVE DISCUSSION	03/01/00	115.15
E. TUDGROCKERS TYSONS CORNER, VA	LEGISLATIVE DISCUSSION	03/09/00	12.36
F. ADVANTAGE RENT A CAR PHOENIX, AZ	RENTAL CAR	03/13/00	105.20
G. PHOENIX AIRPORT PHOENIX, AZ	MEAL	03/14/00	9.50
H. WIGWAM ROOM PHOENIS, AZ	DEPOSIT FOR MEETING RM	03/14/00	32.86
I. METROPOLITAN WASHINGTON WASHINGTON, DC	AIRPORT PARKING	03/14/00	49.00 (64.51) OVERPAYMENT

SUBTOTAL of Disbursements This Page (optional)	344.76
TOTAL This Period (last page this line number only)	14,997.72

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIENDS OF CONGRESSMAN GEORGE MILLER P.O. BOX 5864 CONCORD, CA 94524	D-CA-07-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	03/23/00	(500.00)
B. Full Name, Mailing Address and ZIP Code FRIENDS OF CONGRESSMAN GEORGE MILLER P.O. BOX 5864 CONCORD, CA 94524	D-CA-07-2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/21/00	500.00 REDESIGNATION
C. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR 555 CAPITOL MALL, STE. 1425 SACRAMENTO, CA 95814	D-CA-17-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	03/25/00	(1,000.00)
D. Full Name, Mailing Address and ZIP Code FRIENDS OF FARR 555 CAPITOL MALL, STE. 1425 SACRAMENTO, CA 95814	D-CA-17-2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/11/00	1,000.00 REDESIGNATION
E. Full Name, Mailing Address and ZIP Code LEWIS FOR CONGRESS COMMITTEE P.O. BOX 247 REDLANDS, CA 92373	R-CA-40-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	1,000.00
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code LIEBERMAN 2000 P.O. BOX 231294 HARTFORD, CT 06123	D-CT-SENATE-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/21/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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PAGE 3 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code THURMAN FOR CONGRESS 450 PLEASANT GROVE ROAD INVERNESS, FL 34452	C-FL-05-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/03/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code AZAKA IN 2000 3125 KAOHINANI DRIVE HONOLULU, HI 96817	D-HI-SENATE-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 5 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code VISCLOSKY FOR CONGRESS COMMITTEE P.O. BOX 10003 MERRILLVILLE, IN 46411	D-IN-01-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code DAVID VITTER FOR CONGRESS 2520 METAIRIE ROAD METAIRIE, LA 70001	R-LA-01-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIND

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code CITIZENS FOR SARBANES P.O. BOX 26222 BALTIMORE, MD 21210	D-MD-SENATE-2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/11/00	5,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	5,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AFL/CIO FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code BARNEY FRANK FOR CONGRESS COMMITTEE P.O. BOX 260 NEWTONVILLE, MA 02160	D-MA-04-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	1,000.00
B. Full Name, Mailing Address and ZIP Code TIERNEY FOR CONGRESS 133 WASHINGTON STREET SALEM, MA 01970	D-MA-06-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	1,000.00
C. Full Name, Mailing Address and ZIP Code RE-ELECT CONGRESSMAN JOE MOAKLEY COMMITTEE 141 TREMONT ST., 3RD FLOOR BOSTON, MA 02111	D-MA-09-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	1,000.00
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	3,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code DON PAYNE FOR CONGRESS P.O. BOX 2406 NEWARK, NJ 07114	D-NJ-10-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 10 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWO

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIENDS OF MIKE FORBES P.O. BOX 505 FARMINGVILLE, NY 11738	D-NY-01-2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/18/00	5,000.00
B. Full Name, Mailing Address and ZIP Code FRIENDS OF MAJOR OWENS P.O. BOX 2265 BROOKLYN, NY 11202	D-NY-11-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	500.00
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	5,500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B — ITEMIZED DISBURSEMENTS

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FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MIKE TAYLOR FOR CONGRESS P.O. BOX 2389 ALBEMARLE, NC 28002	D-NC-08-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIENDS OF SHERROD BROWN 607 14TH ST.,NW, STE. 800 WASHINGTON, DC 20005	D-OH-13-2000 Disbursement for: [ ] Primary [X] General [ ] Other (specify)	04/11/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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SUBTOTAL of Disbursements This Page (optional)	500.00
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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLCWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code BLUMENAUER FOR CONGRESS P.O. BOX 1396 PORTLAND, OR 97207	D-OR-03-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
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G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code FRIENDS OF JIM CLYBURN 2725 DEVINE STREET COLUMBIA, SC 29205	D-SC-06-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/11/00	1,000.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 15 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code MORAN FOR CONGRESS P.O. BOX 2518 ALEXANDRIA, VA 22301	D-VA-08-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	01/11/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 16 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (in Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD FEC ID No. C00004325

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
CITIZENS TO ELECT RICK LARSEN P.O. BOX 326 EVERETT, WA 98206	D-WA-02-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	500.00
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
NORM DICKS FOR CONGRESS COMMITTEE P.O. BOX 1683 TACOMA, WA 98401	D-WA-06-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/18/00	500.00
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
	Disbursement for: [ ] Primary [ ] General [ ] Other (specify)		

SUBTOTAL of Disbursements This Page (optional)	1,000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 17 OF 17

FOR LINE NUMBER 23

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code BYRUM FOR CONGRESS P.O. BOX 26191 LANSING, MI 48823	D-MI-08-2000 Disbursement for: [X] Primary [ ] General [ ] Other (specify)	04/21/00	500.00
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: [ ] Primary [ ] General [ ] Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	500.00
TOTAL This Period (last page this line number only)	23,500.00

SCHEDULE B — ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
SEAFARERS POLITICAL ACTIVITY DONATION
SEAFARERS INT'L UNION OF NA-AGLIWD

FEC ID No. C00004325

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement / Disbursement for: Primary / General / Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
A. AMERIPAC 1850 K ST., NW, STE. 950 WASHINGTON, DC 20006	NAT'L/NON-RELATED 2000	04/18/00	1,000.00
B. WOOD RIVER TOWNSHIP DEMOCRAT P.O. BOX 229 WOOD RIVER, IL 62095	D-IL-STATE & LOCAL	04/18/00	100.00
C. SPITZER 2002 611 BROADWAY, STE. 206 NEW YORK, NY 10012	D-NY-STATE & LOCAL	04/11/00	500.00
D. LADENBURG FOR EXECUTIVE P.O. BOX 1434 TACOMA, WA 98401	D-WA-STATE & LOCAL	04/11/00	500.00
E. GREENBRIER COMMUNITY COLLEGE FOUNDATION, INC. P.O. BOX 1360 LEWISBURG, WV 24901	CONTRIBUTION	04/18/00	1,000.00
F.			
G.			
H.			
I.			

SUBTOTAL of Disbursements This Page (optional) 3,100.00

TOTAL This Period (last page this line number only) 3,100.00

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	Date of Receipt
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 5-18-00
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House office of Records and Registration	Date of Receipt
☐	Received from the Senate Office of Public Records	Date of Receipt
☐	Other (Specify):	Postmarked _____ and/or Date of Receipt
☐	Electronic Filing	

PREPARER

5-22-00
DATE PREPARED

(4/98)