

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

UAW EDUCATION FUND

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2014"/>	<input type="text"/>	<input type="text" value="8533982.15"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="7206205.45"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="0.00"/>	<input type="text" value="0.00"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="7206205.45"/>	<input type="text" value="8533982.15"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="1560824.59"/>	<input type="text" value="2888601.29"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="5645380.86"/>	<input type="text" value="5645380.86"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

UAW EDUCATION FUND

Report Covering the Period: From: 10 / 01 / 2014 To: 10 / 15 / 2014

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	0.00	0.00
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 Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶	0.00	0.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	0.00	0.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	177776.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	177776.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	550000.00	900000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	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	1010824.59	1810824.59
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1560824.59	2888601.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1560824.59	2888601.29

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	0.00	0.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	0.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶	0.00	177776.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)▶	0.00	177776.70

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. HOUSE MAJORITY PAC

Mailing Address 700 13TH STREET NW SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : **SB23.4264**

Amount of Each Disbursement this Period

200000.00

B. SENATE MAJORITY PAC

Full Name (Last, First, Middle Initial)

Mailing Address 700 13TH STREET, NW, SUITE 600

City WASHINGTON DC State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : **SB23.4265**

Amount of Each Disbursement this Period

250000.00

C. WE ARE KENTUCKY

Full Name (Last, First, Middle Initial)

Mailing Address 127 W MAIN STREET

City LEXINGTON State KY Zip Code 40507

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : **SB23.4266**

Amount of Each Disbursement this Period

100000.00

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

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

550000.00

550000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. DEMOCRATIC GOVERNORS ASSOCIATION

Mailing Address 1401 K STREET, NW, SUITE 200

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB29.4263

Amount of Each Disbursement this Period

300000.00

Full Name (Last, First, Middle Initial)

B. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBER COMMUNICATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB29.4303

Amount of Each Disbursement this Period

170393.00

Full Name (Last, First, Middle Initial)

C. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBERSHIP MAIL PROGRAM

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : SB29.4305

Amount of Each Disbursement this Period

67536.56

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

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

537929.56

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4303

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4305

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBER MAIL PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 03 / 2014

Transaction ID : SB29.4306

Amount of Each Disbursement this Period

41816.12

Full Name (Last, First, Middle Initial)

B. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBER MAIL PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 05 / 2014

Transaction ID : SB29.4309

Amount of Each Disbursement this Period

41816.12

Full Name (Last, First, Middle Initial)

C. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBER MAILING

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y
10 / 06 / 2014

Transaction ID : SB29.4307

Amount of Each Disbursement this Period

71432.90

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

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

155065.14

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4306

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4309

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4307

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. PETEL & COMPANY

Mailing Address 737 8TH SE, SUITE 202

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
MEMBER MAIL PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 08 / 2014

Transaction ID : **SB29.4308**

Amount of Each Disbursement this Period

80855.28

Category/
Type

Full Name (Last, First, Middle Initial)

B. PRECISION COMMUNICATIONS ENTERPRISES,

Mailing Address PO BOX 7335

City SILVER SPRING State MD Zip Code 20907

Purpose of Disbursement
MEMBER PHONE PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 01 / 2014

Transaction ID : **SB29.4310**

Amount of Each Disbursement this Period

86204.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. PRECISION COMMUNICATIONS ENTERPRISES,

Mailing Address PO BOX 7335

City SILVER SPRING State MD Zip Code 20907

Purpose of Disbursement
MEMBER PHONE PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 02 / 2014

Transaction ID : **SB29.4311**

Amount of Each Disbursement this Period

9010.68

Category/
Type

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

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

176069.96

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4308

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4310

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4311

INTERNAL COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. UAW LOCAL 1112

Mailing Address 11471 REUTHER DRIVE SW

City WARREN State OH Zip Code 44481

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.4312**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 1243

Mailing Address 1116 S. MEARS AVE.

City WHITEHALL State MI Zip Code 48461

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.4313**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. UAW LOCAL 1268

Mailing Address 1100 W. CHRYSLER DRIVE

City BELVIDERE State IL Zip Code 61008

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : **SB29.4314**

Amount of Each Disbursement this Period

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

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

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4312

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4313

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4314

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. UAW LOCAL 2164

Mailing Address 712 PLUM SPRINGS LOOP

City BOWLING GREEN State KY Zip Code 42101

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 15 / 2014

Transaction ID : SB29.4315

Amount of Each Disbursement this Period

5847.14

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 228

Mailing Address 39209 MOUND ROAD

City STERLING HEIGHTS State MI Zip Code 48310

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.4316

Amount of Each Disbursement this Period

11514.94

Full Name (Last, First, Middle Initial)

C. UAW LOCAL 3520

Mailing Address 2290 SALISBURY HIGHWAY

City STATESVILLE State NC Zip Code 28677

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
10 / 09 / 2014

Transaction ID : SB29.4317

Amount of Each Disbursement this Period

12111.72

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

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

29473.80

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4315

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4316

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4317

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. UAW LOCAL 376

Mailing Address 97 SOUTH ST., SUITE 122-124

City WEST HARTFORD State CT Zip Code 06110

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 10 / 2014

Transaction ID : **SB29.4318**

Amount of Each Disbursement this Period

10918.16

B. UAW LOCAL 469

Mailing Address 9618 WEST GREENFIELD AVE.

City WEST ALLIS State WI Zip Code 53214-2601

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 15 / 2014

Transaction ID : **SB29.4319**

Amount of Each Disbursement this Period

5847.14

C. UAW LOCAL 602

Mailing Address 2510 W. MICHIGAN AVENUE

City LANSING State MI Zip Code 48917

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 09 / 2014

Transaction ID : **SB29.4321**

Amount of Each Disbursement this Period

9685.46

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

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

26450.76

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4318

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4319

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C5 B9CI G`H9LH`F9 @5 H98 `HC`5 `F9DCFH`ZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4321

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. UAW LOCAL 653

Mailing Address 670 E. WALTON BLVD.

City PONTIAC State MI Zip Code 48340

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 09 / 2014

Transaction ID : SB29.4322

Amount of Each Disbursement this Period

11514.94

Category/
Type

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 677

Mailing Address 2101 MACK BLVD.

City ALLENTOWN State PA Zip Code 18103

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 09 / 2014

Transaction ID : SB29.4323

Amount of Each Disbursement this Period

12131.29

Category/
Type

Full Name (Last, First, Middle Initial)

C. UAW LOCAL 816

Mailing Address PO BOX 497

City ROANOKE State TX Zip Code 76262

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /
10 / 09 / 2014

Transaction ID : SB29.4324

Amount of Each Disbursement this Period

10918.16

Category/
Type

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

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

34564.39

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4322

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4323

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4324

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule:

Transaction ID:

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW EDUCATION FUND

Full Name (Last, First, Middle Initial)

A. UAW LOCAL 838

Mailing Address 2615 WASHINGTON ST.

City WATERLOO State IA Zip Code 50702

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	9		2	0	1	4

Transaction ID : SB29.4325

Amount of Each Disbursement this Period

1	2	1	1	1	.	7	2
---	---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 882

Mailing Address 3915 GILBERT RD., SE

City ATLANTA State GA Zip Code 30354

Purpose of Disbursement
MEMBER ELECTION PROGRAM

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

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

Transaction ID : SB29.4326

Amount of Each Disbursement this Period

9	4	8	6	.	5	3
---	---	---	---	---	---	---

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--	--	--

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

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

2	1	5	9	8	.	2	5
---	---	---	---	---	---	---	---

1	0	1	0	8	2	4	.	5	9
---	---	---	---	---	---	---	---	---	---

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB29

Transaction ID : SB29.4325

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03

Form/Schedule: SB29

Transaction ID: SB29.4326

MEMBERSHIP COMMUNICATION TO THE RESTRICTED CLASS PURSUANT TO AO-2000-03