

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

ADDRESS (number and street) 8000 EAST JEFFERSON
Check if different than previously reported. (ACC) DETROIT MI 48214

2. FEC IDENTIFICATION NUMBER C00002840
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 11 28 2006 through 12 31 2006

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 Elizabeth Bunn
Signature of Treasurer Electronically Filed by Elizabeth Bunn Date 01 26 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

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

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		11201508.24
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	7060242.85									
(c) Total Receipts (from Line 19)	196156.15	5804910.92								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	7256399.00	17006419.16								
7. Total Disbursements (from Line 31)	72228.98	9822249.14								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7184170.02	7184170.02								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

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

Report Covering the Period: From:

M	M
1	1

D	D
2	8

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	6

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	10947.38	119357.00
(i) Itemized (use Schedule A)	177328.66	5621156.09
(ii) Unitemized	188276.04	5740513.09
(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)	188276.04	5740513.09
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	1000.00	4000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6880.11	60397.83
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))	196156.15	5804910.92
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	196156.15	5804910.92

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) 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.....	67569.58	692390.48
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	67569.58	692390.48
22. Transfers to Affiliated/Other Party Committees.....	0.00	100000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9000.00	1662850.00
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	986.50
(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	986.50
29. Other Disbursements.....	-4340.60	7366022.16
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))..	72228.98	9822249.14
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	72228.98	9822249.14

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	188276.04	5740513.09
34. Total Contribution Refunds (from Line 28(d))	0.00	986.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	188276.04	5739526.59
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	67569.58	692390.48
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	67569.58	692390.48

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
SHEILA ABRAHAM

Mailing Address 1914 CONE ST

City TOLEDO State OH Zip Code 43606

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

Name of Employer ST VINCENT MERCY MEDICAL CEN Occupation TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75740

Amount of Each Receipt this Period
12.50

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

Mailing Address 3628 BIRDSONG LN

City JANESVILLE State WI Zip Code 53548-8503

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 236.00

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

Transaction ID: SA11A1.75529

Amount of Each Receipt this Period
15.00

C. Full Name (Last, First, Middle Initial)
ERIC S. ATKINS

Mailing Address 295 ILENE AVENUE

City SOUTH LEBANON State OH Zip Code 45065

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

Name of Employer AMTEX, INC. Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

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

Transaction ID: SA11A1.75735

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	57.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. TIMOTHY J AUBRY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 4433 285TH ST		Transaction ID: SA11A1.75683
City TOLEDO	State OH	Zip Code 43611-1912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. TIMOTHY J AUBRY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 4433 285TH ST		Transaction ID: SA11A1.75962
City TOLEDO	State OH	Zip Code 43611-1912
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. BRIAN BABCOCK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 319 MICHIGAN ST.		Transaction ID: SA11A1.75710
City PORTER	State IN	Zip Code 46304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 23.08
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.08	

SUBTOTAL of Receipts This Page (optional)	34.62
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
SUSANNE BARWILER

Mailing Address **525 CARLTON ST**

City **TOLEDO** State **OH** Zip Code **43609**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **206.25**

Date of Receipt
M M / D D / Y Y Y Y
12 / 06 / 2006

Transaction ID: SA11A1.75620

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
SCOTT BAUER

Mailing Address **11756 ECKERT LANE**

City **SPANISH LAKE** State **MO** Zip Code **63138**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 07 / 2006

Transaction ID: SA11A1.75899

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
PETER BEHRENSPRUNG

Mailing Address **1628 MICHIGAN AVENUE**

City **SHEBOYGAN** State **WI** Zip Code **53081-3273**

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

Name of Employer **KOHLER CO** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **316.00**

Date of Receipt
M M / D D / Y Y Y Y
12 / 05 / 2006

Transaction ID: SA11A1.75554

Amount of Each Receipt this Period
50.00

SUBTOTAL of Receipts This Page (optional)	100.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address **1635 DALE RIDGE RD.**

City **NEW CARLISLE** State **OH** Zip Code **45344-2410**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.50**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	1	1	/	2	0	0	6

Transaction ID: SA11A1.76019

Amount of Each Receipt this Period

93.75

B. Full Name (Last, First, Middle Initial)
CHAD BENNER

Mailing Address **2509 GENOA RD**

City **PERRYSBURG** State **OH** Zip Code **43551**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **262.50**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	6	/	2	0	0	6

Transaction ID: SA11A1.75631

Amount of Each Receipt this Period

25.00

C. Full Name (Last, First, Middle Initial)
MICHAEL J. BINK

Mailing Address **W 2260 COUNTY ROAD**

City **OCONOMOWOC** State **WI** Zip Code **53066-9545**

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

Name of Employer **AMERICAN BRANDS** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **289.00**

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	0	4	/	2	0	0	6

Transaction ID: SA11A1.75519

Amount of Each Receipt this Period

8.50

SUBTOTAL of Receipts This Page (optional)	127.25
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. MICHAEL J. BINK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address W 2260 COUNTY ROAD		Transaction ID: SA11A1.76011	
City OCONOMOWOC	State WI	Zip Code 53066-9545	Amount of Each Receipt this Period 8.50
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.50		

Full Name (Last, First, Middle Initial) B. MICHAEL J. BINK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 6	
Mailing Address W 2260 COUNTY ROAD		Transaction ID: SA11A1.75463	
City OCONOMOWOC	State WI	Zip Code 53066-9545	Amount of Each Receipt this Period 8.50
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.00		

Full Name (Last, First, Middle Initial) C. DAVID BOAK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 6	
Mailing Address 8301 W PARKS RD		Transaction ID: SA11A1.75637	
City SAINT JOHNS	State MI	Zip Code 48879-9563	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer FEDERAL MOGUL CORP	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

SUBTOTAL of Receipts This Page (optional) ▶	42.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) MICHELLE BONE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 214 FERRIS AVENUE		Transaction ID: SA11A1.76028	
City State Zip Code TOLEDO OH 43608-1768		Amount of Each Receipt this Period 12.50	
FEC ID number of contributing federal political committee. C			
Name of Employer ST VINCENT MERCY MEDICAL CEN		Occupation TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.50	

B. Full Name (Last, First, Middle Initial) KENNETH L BRADFORD		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 3325 PETE SHAW RD		Transaction ID: SA11A1.75555	
City State Zip Code MARIETTA GA 30066-2354		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) SHARON K BRADLEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 389 E PIKE		Transaction ID: SA11A1.75649	
City State Zip Code SOUTH LEBANON OH 45065-1351		Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C			
Name of Employer AMTEX, INC.		Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.00	

SUBTOTAL of Receipts This Page (optional) ▶	342.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. RONALD L BRAGG		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 3060 THISTLE BEND CT		Transaction ID: SA11A1.75672	
City State Zip Code MURFREESBORO TN 37130-0322	Amount of Each Receipt this Period 61.00		
FEC ID number of contributing federal political committee. C			
Name of Employer RYDER SYSTEMS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 305.00		

Full Name (Last, First, Middle Initial) B. HERBERT R BRAND JR		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 119 WILLOW LANE		Transaction ID: SA11A1.75714	
City State Zip Code WAXAHACHIE TX 75165-9651	Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LOCKHEED MARTIN CORPORATI- ON	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.00		

Full Name (Last, First, Middle Initial) C. GLEN BREWER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 309-1/2 MAIN ST.		Transaction ID: SA11A1.75803	
City State Zip Code SIDNEY OH 45365	Amount of Each Receipt this Period 93.75		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25		

SUBTOTAL of Receipts This Page (optional) ▶	178.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. TODD BRIEN		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 2723 CUMBERLAND DR		Transaction ID: SA11A1.75863
City JANESVILLE	State WI	Zip Code 53546-4347
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.00	

Full Name (Last, First, Middle Initial) B. GLORIA BUCK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 6623 COLLINSDALE RD		Transaction ID: SA11A1.75513
City BALTIMORE	State MD	Zip Code 21234
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. TIMOTHY J BUCK		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 11610 MONCLOVA RD		Transaction ID: SA11A1.75806
City MONCLOVA	State OH	Zip Code 43542-9714
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

SUBTOTAL of Receipts This Page (optional)	323.77
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
TIMOTHY J BUCK

Mailing Address 11610 MONCLOVA RD

City State Zip Code
MONCLOVA OH 43542-9714

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

Name of Employer Occupation
JOHNSON CONTROLS INC FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.72

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

Transaction ID: SA11A1.75807

Amount of Each Receipt this Period
5.77

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

Mailing Address 1790 MURDOCK RD

City State Zip Code
MARIETTA GA 30062-4829

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 800.00

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

Transaction ID: SA11A1.75561

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
TONY CAMILLO

Mailing Address 76 HIGGINS AVE

City State Zip Code
LOS ALTOS CA 94022-3100

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

Name of Employer Occupation
NEW UNITED MOTORS MFG FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75497

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional)	▶	332.77
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) DONNA CARTER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1450 DELAWARE		Transaction ID: SA11A1.75578
City TOLEDO State OH Zip Code 43606	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 268.75	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) JOHN CASEY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 3263 CROMWELL DR		Transaction ID: SA11A1.75628
City OREGON State OH Zip Code 43616-2363	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 201.95	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) JOHN CASEY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 3263 CROMWELL DR		Transaction ID: SA11A1.76013
City OREGON State OH Zip Code 43616-2363	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 207.72	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	36.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. KENNEDY CHAMBERS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 1109 TECUMSEH		Transaction ID: SA11A1.75797
City TOLEDO State OH Zip Code 43608	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 201.95	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. KENNEDY CHAMBERS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1109 TECUMSEH		Transaction ID: SA11A1.75860
City TOLEDO State OH Zip Code 43608	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 207.72	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NORMAN G CHAMBERS JR		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address PO BOX 164		Transaction ID: SA11A1.75919
City ROSSFORD State OH Zip Code 43460-0164	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 201.95	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	17.31
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
NORMAN G CHAMBERS JR

Mailing Address PO BOX 164

City State Zip Code
ROSSFORD OH 43460-0164

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

Name of Employer Occupation
JOHNSON CONTROLS INC FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.72

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

Transaction ID: SA11A1.75811

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
MICHAEL COLE

Mailing Address 17144 SUNSET DR.

City State Zip Code
SIDNEY OH 45365-9239

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.75

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

Transaction ID: SA11A1.75964

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JAVIER S CONTRERAS

Mailing Address 24698 WILLIMET WAY

City State Zip Code
HAYWARD CA 94544-1146

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

Name of Employer Occupation
NEW UNITED MOTORS MFG FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75663

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	135.77
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. EDWARD S CONWAY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 2725 CLADIUS DR		Transaction ID: SA11A1.75887
City State Zip Code GRAND PRAIRIE TX 75052-7010	Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LOCKHEED MARTIN CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.00	

Full Name (Last, First, Middle Initial) B. DANIEL E COOK		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 844 N. CLINTON LOT C-41		Transaction ID: SA11A1.75788
City State Zip Code DEFIANCE OH 43512	Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DEFIANCE PRECISION PRODUCTS	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 228.00	

Full Name (Last, First, Middle Initial) C. CHARLES BRENT COPELAND		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 228 S WAGNER STREET		Transaction ID: SA11A1.75639
City State Zip Code WAPAKONETA OH 45895	Amount of Each Receipt this Period 87.50	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	135.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
LYNN CROWE

Mailing Address 12559 STATE ROUTE 362

City MINSTER State OH Zip Code 45865-9304

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

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

Transaction ID: SA11A1.75799

Amount of Each Receipt this Period
100.00

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

Mailing Address 6889 WAGONER

City PERRYSBURG State OH Zip Code 43551

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: SA11A1.75570

Amount of Each Receipt this Period
18.75

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

Mailing Address 5542 THORNBROOK TRAIL

City TOLEDO State OH Zip Code 43611-1425

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

Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 201.95

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75790

Amount of Each Receipt this Period
5.77

SUBTOTAL of Receipts This Page (optional)	▶	124.52
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. JEFFREY DEGROFF		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 5542 THORNBROOK TRAIL		Transaction ID: SA11A1.75956
City TOLEDO	State OH	Zip Code 43611-1425
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. GREG DINGESS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address P O BOX 83		Transaction ID: SA11A1.75466
City LUCKEY	State OH	Zip Code 43443-0083
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) C. GREG DINGESS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address P O BOX 83		Transaction ID: SA11A1.76015
City LUCKEY	State OH	Zip Code 43443-0083
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional)	▶	17.31
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. BETTY DIX		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 309 E HILLSIDE LANE		Transaction ID: SA11A1.75958
City State Zip Code HOLLAND OH 43528	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.25	

Full Name (Last, First, Middle Initial) B. L Donaldson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 1001 HOOK WALTZ RD W		Transaction ID: SA11A1.75670
City State Zip Code LIMA OH 45807-9580	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL DYNAMICS CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) C. L Donaldson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1001 HOOK WALTZ RD W		Transaction ID: SA11A1.76070
City State Zip Code LIMA OH 45807-9580	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL DYNAMICS CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. L Donaldson		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6	
Mailing Address 1001 HOOK WALTZ RD W		Transaction ID: SA11A1.75780	
City LIMA	State OH	Zip Code 45807-9580	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL DYNAMICS CORP	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. KENNETH W DONLEY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1417 LEBANON ST		Transaction ID: SA11A1.75974	
City TOLEDO	State OH	Zip Code 43605-3505	Amount of Each Receipt this Period 5.77
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

Full Name (Last, First, Middle Initial) C. KENNETH W DONLEY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1417 LEBANON ST		Transaction ID: SA11A1.75810	
City TOLEDO	State OH	Zip Code 43605-3505	Amount of Each Receipt this Period 5.77
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72		

SUBTOTAL of Receipts This Page (optional) ▶	61.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ERIC DRAIN		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 6018 COLCHESTER		Transaction ID: SA11A1.75733	
City State Zip Code OREGON OH 43616		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.50	

Full Name (Last, First, Middle Initial) B. K H DUBEKRE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 3703 LASALLE DR		Transaction ID: SA11A1.75598	
City State Zip Code ARLINGTON TX 76016-2930		Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LOCKHEED MARTIN CORPORATI- ON FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 438.00	

Full Name (Last, First, Middle Initial) C. LARRY W EDMONSON		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 5277 FM ROAD 55		Transaction ID: SA11A1.76061	
City State Zip Code BLOOMING GROVE TX 76626-9778		Amount of Each Receipt this Period 34.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LOCKHEED MARTIN CORPORATI- ON FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 620.50	

SUBTOTAL of Receipts This Page (optional) ▶	83.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) DENISE ELLIS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 221 MANHATTAN		Transaction ID: SA11A1.75912	
City State Zip Code TOLEDO OH 43608		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 262.50	

B. Full Name (Last, First, Middle Initial) EDWARD FILLIATER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 802 W CENTER ST		Transaction ID: SA11A1.75896	
City State Zip Code FOSTORIA OH 44830-1714		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CUMMINS ENGINE CO FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

C. Full Name (Last, First, Middle Initial) TIMOTHY FLEMING		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 861 LINCOLN AVE		Transaction ID: SA11A1.76002	
City State Zip Code FOSTORIA OH 44830-1465		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation CUMMINS ENGINE CO FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.00	

SUBTOTAL of Receipts This Page (optional) ▶	325.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. REX FLORENCE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 636 WHITE OAK DR		Transaction ID: SA11A1.75679	
City TOLEDO	State OH	Amount of Each Receipt this Period 25.00	
Zip Code 43615			
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. THOMAS C. FRANCIS		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 6	
Mailing Address 4196 SR 47		Transaction ID: SA11A1.75963	
City FT LORAMIE	State OH	Amount of Each Receipt this Period 28.00	
Zip Code 45845			
FEC ID number of contributing federal political committee. C			
Name of Employer GOODRICH B F CO	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		

Full Name (Last, First, Middle Initial) C. DANIEL GIBSON		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 25 S. MAIN ST.		Transaction ID: SA11A1.75798	
City FORT LORAMIE	State OH	Amount of Each Receipt this Period 100.00	
Zip Code 45845-9770			
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75		

SUBTOTAL of Receipts This Page (optional) ▶	153.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
JERRY GIRON

Mailing Address 3626 KINGSWAY AVE.

City State Zip Code
ANAHEIM CA 92804

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.76052

Amount of Each Receipt this Period
300.00

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

Mailing Address 5208 LITTLE MOUNTAIN RD.

City State Zip Code
GASTONIA NC 28056-6916

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

Name of Employer Occupation
DAIMLERCHRYSLER FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 315.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75995

Amount of Each Receipt this Period
35.00

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

Mailing Address 1716 DUNCAN RD

City State Zip Code
TOLEDO OH 43613

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: SA11A1.75695

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	360.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ROBERT GRANGE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 29280 PROVIDENCE WAY		Transaction ID: SA11A1.75597	
City HAYWARD	State CA	Zip Code 94544-6412	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. MICHAEL GREGG		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 1751 AVALON RD		Transaction ID: SA11A1.75983	
City CLEVELAND	State OH	Zip Code 44112	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer ALCOA INC.	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) C. MICHAEL GREGG		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1751 AVALON RD		Transaction ID: SA11A1.75925	
City CLEVELAND	State OH	Zip Code 44112	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer ALCOA INC.	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	105.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. DONNA HAMILTON		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1126 W WOODRUFF AVE		Transaction ID: SA11A1.75486	
City State Zip Code TOLEDO OH 43606-4854		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 268.75	

Full Name (Last, First, Middle Initial) B. LEWIS HANKINS, JR.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1010 TECUMSEH		Transaction ID: SA11A1.75723	
City State Zip Code TOLEDO OH 43607		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) C. LEWIS HANKINS, JR.		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1010 TECUMSEH		Transaction ID: SA11A1.75849	
City State Zip Code TOLEDO OH 43607		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional) ▶	36.54
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. EDWARD HARMON		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 214 GARNSEY		Transaction ID: SA11A1.76029
City METAMORA	State OH	Zip Code 43540
Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

Full Name (Last, First, Middle Initial) B. TERRY J HARPER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 4800 SUGAR TREE CT		Transaction ID: SA11A1.75921
City ARLINGTON	State TX	Zip Code 76017-2350
Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C		
Name of Employer LOCKHEED MARTIN CORPORATI- ON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 438.00	

Full Name (Last, First, Middle Initial) C. CLINT HARRIS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 13211 MORRISON		Transaction ID: SA11A1.75548
City LITTLE ROCK	State AR	Zip Code 72212
Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C		
Name of Employer BOEING	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	349.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 316 1/2 EAST WEBER

City TOLEDO State OH Zip Code 43608

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.75

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

Transaction ID: SA11A1.75950

Amount of Each Receipt this Period
25.00

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

Mailing Address 929 N MAIN ST

City FOSTORIA State OH Zip Code 44830-2013

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

Name of Employer CUMMINS ENGINE CO Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 205.00

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

Transaction ID: SA11A1.75705

Amount of Each Receipt this Period
115.00

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

Mailing Address 1022 JUSTUS DRIVE

City JOHNSON CITY State TN Zip Code 37604

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

Name of Employer REXROTH CORP. Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 600.00

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

Transaction ID: SA11A1.75818

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	440.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 31 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

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

Mailing Address 1106 HOLLYWOOD ROAD

City State Zip Code
SANDUSKY OH 44870-4273

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

Name of Employer Occupation
BELLEVUE MFG CO FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

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

Transaction ID: SA11A1.75574

Amount of Each Receipt this Period
31.25

B. Full Name (Last, First, Middle Initial)
JANET C HENRY

Mailing Address 3212 134TH STREET

City State Zip Code
TOLEDO OH 43611

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

Name of Employer Occupation
ST VINCENT MERCY MEDICAL CEN TECHNICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75479

Amount of Each Receipt this Period
12.50

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

Mailing Address 426 HAWKINS

City State Zip Code
YPSILANTI MI 48197

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

Name of Employer Occupation
JAC PRODUCTS, INC. FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 268.75

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

Transaction ID: SA11A1.75549

Amount of Each Receipt this Period
31.25

SUBTOTAL of Receipts This Page (optional)	▶	75.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. CLYDE HOLLINGSWORTH		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 908 INDEPENDENCE ROAD		Transaction ID: SA11A1.75895
City TOLEDO State OH Zip Code 43607-2530	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 218.75	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. PHILLIP HOLMES		Date of Receipt M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 1210 JOHNSON DR		Transaction ID: SA11A1.75924
City FOSTORIA State OH Zip Code 44830-4703	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CUMMINS ENGINE CO Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 325.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. PHILLIP HOLMES		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 1210 JOHNSON DR		Transaction ID: SA11A1.75708
City FOSTORIA State OH Zip Code 44830-4703	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. C		
Name of Employer CUMMINS ENGINE CO Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 330.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	35.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 33 / 95
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. ALBERTA HOPINGS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 719 DELAWARE AVE		Transaction ID: SA11A1.75476
City TOLEDO	State OH	Zip Code 43610-1302
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. ALBERTA HOPINGS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 719 DELAWARE AVE		Transaction ID: SA11A1.75477
City TOLEDO	State OH	Zip Code 43610-1302
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. EARL HOPINGS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 2366 NEBRASKA AVE		Transaction ID: SA11A1.76009
City TOLEDO	State OH	Zip Code 43607-3520
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

SUBTOTAL of Receipts This Page (optional)	▶	17.31
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
EARL HOPINGS

Mailing Address **2366 NEBRASKA AVE**

City **TOLEDO** State **OH** Zip Code **43607-3520**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.72**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 06 / 2006

Transaction ID: SA11A1.75461

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
TERRY JARVIS

Mailing Address **9151 MOSHERVILLE RD**

City **LITCHFIELD** State **MI** Zip Code **49252**

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

Name of Employer **ARVINMERITOR, INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **206.00**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 04 / 2006

Transaction ID: SA11A1.75501

Amount of Each Receipt this Period
30.00

C. Full Name (Last, First, Middle Initial)
PETER L JEREMY

Mailing Address **111 CLARK ST**

City **HOLLAND** State **OH** Zip Code **43528-8766**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.95**

Date of Receipt
M M / D D / Y Y Y Y Y
12 / 05 / 2006

Transaction ID: SA11A1.75808

Amount of Each Receipt this Period
5.77

SUBTOTAL of Receipts This Page (optional)	41.54
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) PETER L JEREMY Mailing Address 111 CLARK ST City HOLLAND State OH Zip Code 43528-8766 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6 Transaction ID: SA11A1.75485 Amount of Each Receipt this Period 5.77
Name of Employer: JOHNSON CONTROLS INC Occupation: FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 207.72		

B. Full Name (Last, First, Middle Initial) P Jimenez Mailing Address 424 COUNTY ROAD 1110A City CLEBURNE State TX Zip Code 76031-8658 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.75935 Amount of Each Receipt this Period 54.25
Name of Employer: VOUGHT AIRCRAFT COMPANY Occupation: FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.50		

C. Full Name (Last, First, Middle Initial) RACHELLE JOHNSON Mailing Address 1330 BROOKVIEW DRIVE APT. 6 City TOLEDO State OH Zip Code 43615-7529 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6 Transaction ID: SA11A1.75855 Amount of Each Receipt this Period 5.77
Name of Employer: JOHNSON CONTROLS INC Occupation: FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 201.95		

SUBTOTAL of Receipts This Page (optional)	▶	65.79
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 1330 BROOKVIEW DRIVE
APT. 6

City Toledo State OH Zip Code 43615-7529

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

Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.72

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

Transaction ID: SA11A1.75465

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
RONALD KAECK

Mailing Address 526 SPRING ST.

City PIQUA State OH Zip Code 45356-2338

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 232.73

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

Transaction ID: SA11A1.76088

Amount of Each Receipt this Period
87.50

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

Mailing Address 311 E. BENTON ST.

City WAPAKONETA State OH Zip Code 45895-2307

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

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

Transaction ID: SA11A1.75961

Amount of Each Receipt this Period
93.75

SUBTOTAL of Receipts This Page (optional)	187.02
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. JASON KOECHLEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 2472 KENWOOD-LOWER		Transaction ID: SA11A1.75864
City TOLEDO	State OH	Zip Code 43606
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.75
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER P KOS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 6108 317TH ST.		Transaction ID: SA11A1.75696
City TOLEDO	State OH	Zip Code 43611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) C. CHRISTOPHER P KOS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 6108 317TH ST.		Transaction ID: SA11A1.75977
City TOLEDO	State OH	Zip Code 43611
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional)	▶	30.29
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 38 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. TAMI KOWALSKI		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1960 BARROWS STREET		Transaction ID: SA11A1.75626	
City TOLEDO State OH Zip Code 43613-4502	Amount of Each Receipt this Period 12.50		
FEC ID number of contributing federal political committee. C			
Name of Employer ST VINCENT MERCY MEDICAL CEN	Occupation TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50		

Full Name (Last, First, Middle Initial) B. MICHAEL R KUMMERER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 16 MEADOW LN		Transaction ID: SA11A1.75970	
City BECHTELSVILLE State PA Zip Code 19505-9720	Amount of Each Receipt this Period 24.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DANA CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.00		

Full Name (Last, First, Middle Initial) C. CLARENCE W LAGRANGE		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 4759 298TH ST		Transaction ID: SA11A1.75910	
City TOLEDO State OH Zip Code 43611-2113	Amount of Each Receipt this Period 5.77		
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

SUBTOTAL of Receipts This Page (optional) ▶	42.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
CLARENCE W LAGRANGE

Mailing Address 4759 298TH ST

City Toledo State OH Zip Code 43611-2113

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

Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.72

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

Transaction ID: SA11A1.75792

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
WILLA LAMB

Mailing Address 706 INDEPENDENCE

City Toledo State OH Zip Code 43607

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

Name of Employer ST VINCENT MERCY MEDICAL CEN Occupation TECHNICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75730

Amount of Each Receipt this Period
12.50

C. Full Name (Last, First, Middle Initial)
NICHOLAS LAROSA

Mailing Address S-4603 MORGAN PWKY

City Hamburg State NY Zip Code 14075-3122

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

Name of Employer Occupation RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.76043

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	318.27
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. HARLEY O LAWS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 5671 COUNTY ROAD C		Transaction ID: SA11A1.75673
City State Zip Code DELTA OH 43515-9627	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. HARLEY O LAWS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 5671 COUNTY ROAD C		Transaction ID: SA11A1.75567
City State Zip Code DELTA OH 43515-9627	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. HARLEY O LAWS IV		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 836 MC KINLEY		Transaction ID: SA11A1.75850
City State Zip Code TOLEDO OH 43605	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS, INC.	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

SUBTOTAL of Receipts This Page (optional) ▶	17.31
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 41 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial) HARLEY O LAWS IV		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 836 MC KINLEY		Transaction ID: SA11A1.75851	
City State Zip Code TOLEDO OH 43605		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS, INC. FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.72	

B. Full Name (Last, First, Middle Initial) SANDRA LAWSON		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 2010 WELKER		Transaction ID: SA11A1.75724	
City State Zip Code TOLEDO OH 43613		Amount of Each Receipt this Period 12.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation ST VINCENT MERCY MEDICAL CEN TECHNICIAN			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 212.50	

C. Full Name (Last, First, Middle Initial) GERHARD E LINNER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 557 WEST THIRD ST		Transaction ID: SA11A1.75888	
City State Zip Code MANSFIELD OH 44906-2648		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	318.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. THERESE LITZSEY-ADAMS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 6100 BUENA VENTURA AVE		Transaction ID: SA11A1.75718
City OAKLAND State CA Zip Code 94605-1810	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NEW UNITED MOTORS MFG Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	225.00

Full Name (Last, First, Middle Initial) B. GRACE LIZCANO		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1575 W CENTRAL AVE		Transaction ID: SA11A1.75692
City TOLEDO State OH Zip Code 43606	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	249.52

Full Name (Last, First, Middle Initial) C. AUGUSTINE C LOHMEYER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 6029 SEAMAN STREET		Transaction ID: SA11A1.75741
City OREGON State OH Zip Code 43616-4231	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	201.95

SUBTOTAL of Receipts This Page (optional)	55.77
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. AUGUSTINE C LOHMEYER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 6029 SEAMAN STREET		Transaction ID: SA11A1.75867
City State Zip Code OREGON OH 43616-4231	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. IAN MACLACHLAN		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 1626 HAYNES AVE		Transaction ID: SA11A1.76085
City State Zip Code KOKOMO IN 46901-5239	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 7.66
Name of Employer FEDERAL MOGUL CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.10	

Full Name (Last, First, Middle Initial) C. IAN MACLACHLAN		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 1626 HAYNES AVE		Transaction ID: SA11A1.76086
City State Zip Code KOKOMO IN 46901-5239	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 7.66
Name of Employer FEDERAL MOGUL CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.76	

SUBTOTAL of Receipts This Page (optional)	▶	21.09
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
IAN MACLACHLAN

Mailing Address 1626 HAYNES AVE

City State Zip Code
KOKOMO IN 46901-5239

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

Name of Employer Occupation
FEDERAL MOGUL CORP FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 283.42

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

Transaction ID: SA11A1.76075

Amount of Each Receipt this Period
7.66

B. Full Name (Last, First, Middle Initial)
HEATHER MARTINEZ

Mailing Address 26 NEVADA ST

City State Zip Code
TOLEDO OH 43605

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 281.25

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

Transaction ID: SA11A1.75900

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
CHARLOTTE MASSERANT

Mailing Address 4448 288TH ST

City State Zip Code
TOLEDO OH 43611-1917

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

Name of Employer Occupation
ST VINCENT MERCY MEDICAL CEN TECHNICIAN

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75802

Amount of Each Receipt this Period
12.50

SUBTOTAL of Receipts This Page (optional) ► **45.16**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. RUSS MATTEI		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 2718 MACARTHUR AVE		Transaction ID: SA11A1.75868	
City SOUTH BEND	State IN	Amount of Each Receipt this Period 30.00	
Zip Code 46615-3555			
FEC ID number of contributing federal political committee. C			
Name of Employer LT V CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

Full Name (Last, First, Middle Initial) B. SHARON MAXCY		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 6043 CURSON DRIVE		Transaction ID: SA11A1.76025	
City TOLEDO	State OH	Amount of Each Receipt this Period 12.50	
Zip Code 43612			
FEC ID number of contributing federal political committee. C			
Name of Employer ST VINCENT MERCY MEDICAL CEN	Occupation TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50		

Full Name (Last, First, Middle Initial) C. JAMES MCCANN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 6607 JEFFERS RD		Transaction ID: SA11A1.75800	
City SWANTON	State OH	Amount of Each Receipt this Period 5.77	
Zip Code 43558-9141			
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

SUBTOTAL of Receipts This Page (optional) ▶	48.27
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. JAMES MCCANN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 6607 JEFFERS RD		Transaction ID: SA11A1.75736
City SWANTON	State OH	Zip Code 43558-9141
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77	
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) B. MARCIA K MCCANN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6
Mailing Address 4617 W PENDLETON PL		Transaction ID: SA11A1.76068
City PEORIA	State IL	Zip Code 61615-2839
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 600.00	
Name of Employer CATERPILLAR	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

Full Name (Last, First, Middle Initial) C. PAT MCCANN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6
Mailing Address 4617 PENDLETON		Transaction ID: SA11A1.75520
City PEORIA	State IL	Zip Code 61615
FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 426.00	
Name of Employer CATERPILLAR	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 666.00	

SUBTOTAL of Receipts This Page (optional)	▶	1031.77
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ALESIA MCLEMORE		Date of Receipt
Mailing Address 811 BROOKLYN AVE		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City	State	Zip Code
DAYTON	OH	45407-1404
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.75862
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="93.75"/>
Name of Employer	Occupation	
LEAR CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="237.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. STEVEN MCVETY		Date of Receipt
Mailing Address 307 WILLIAMS ST.		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2006"/>
City	State	Zip Code
SIDNEY	OH	45365-1419
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.75687
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="93.75"/>
Name of Employer	Occupation	
LEAR CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="237.50"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. JOHN MEEKER		Date of Receipt
Mailing Address 222 SOMERSET		<input type="text" value="12"/> / <input type="text" value="06"/> / <input type="text" value="2006"/>
City	State	Zip Code
TOLEDO	OH	43609
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.75745
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="25.00"/>
Name of Employer	Occupation	
LEAR CORPORATION	FACTORY WORKER	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="275.00"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="212.50"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 48 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. CROWLEY G MILLER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 2604 OAKRIDGE DR		Transaction ID: SA11A1.76079	
City State Zip Code DAYTON OH 45417-1523	Amount of Each Receipt this Period 93.75		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25		

Full Name (Last, First, Middle Initial) B. PETER MILLER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 4335 BERWICK AVE		Transaction ID: SA11A1.75732	
City State Zip Code TOLEDO OH 43612-1555	Amount of Each Receipt this Period 12.50		
FEC ID number of contributing federal political committee. C			
Name of Employer ST VINCENT MERCY MEDICAL CEN	Occupation TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50		

Full Name (Last, First, Middle Initial) C. MARIA MINKOWSKI		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 232 FERRIS AVE		Transaction ID: SA11A1.75825	
City State Zip Code TOLEDO OH 43608	Amount of Each Receipt this Period 12.50		
FEC ID number of contributing federal political committee. C			
Name of Employer ST VINCENT MERCY MEDICAL CEN	Occupation TECHNICIAN		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50		

SUBTOTAL of Receipts This Page (optional) ▶	118.75
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. JOHN MOJICA		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 6072 BIGELOW CT		Transaction ID: SA11A1.75657	
City State Zip Code SAN JOSE CA 95123-4404	Amount of Each Receipt this Period 40.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

Full Name (Last, First, Middle Initial) B. LUZ E MONTEZ		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 302 VAN BUREN AVE		Transaction ID: SA11A1.76012	
City State Zip Code TOLEDO OH 43605-1928	Amount of Each Receipt this Period 5.77		
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

Full Name (Last, First, Middle Initial) C. LUZ E MONTEZ		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 302 VAN BUREN AVE		Transaction ID: SA11A1.75953	
City State Zip Code TOLEDO OH 43605-1928	Amount of Each Receipt this Period 5.77		
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72		

SUBTOTAL of Receipts This Page (optional) ▶	51.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 50 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. STEVEN MYERS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 9460 SYLVANIA-PETERSBURG RD		Transaction ID: SA11A1.75475
City OTTAWA LAKE	State MI	Zip Code 49267
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.75	

Full Name (Last, First, Middle Initial) B. DENNIS NABORS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 2625 LAWRENCE AVENUE		Transaction ID: SA11A1.75909
City TOLEDO	State OH	Zip Code 43610-1275
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) C. DENNIS NABORS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 2625 LAWRENCE AVENUE		Transaction ID: SA11A1.75959
City TOLEDO	State OH	Zip Code 43610-1275
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional) ▶	36.54
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
HAROLD NEAL

Mailing Address 1740 FRAIL RD.

City LIMA State OH Zip Code 45806-1737

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 243.75

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

Transaction ID: SA11A1.75973

Amount of Each Receipt this Period
 100.00

B. Full Name (Last, First, Middle Initial)
ORLENA M NEAL

Mailing Address P O BOX 3018

City TOLEDO State OH Zip Code 43607-0018

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

Name of Employer ST VINCENT MERCY MEDICAL CEN Occupation TECHNICIAN

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 212.50

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75487

Amount of Each Receipt this Period
 12.50

C. Full Name (Last, First, Middle Initial)
ROGER NEWTON

Mailing Address 10938 COMANCHE DR.

City SIDNEY State OH Zip Code 45365-9586

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 231.25

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

Transaction ID: SA11A1.75908

Amount of Each Receipt this Period
 93.75

SUBTOTAL of Receipts This Page (optional)	▶	206.25
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ALISHA NINO		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1800 N MC CORD RD N #150		Transaction ID: SA11A1.75865
City TOLEDO	State OH	Zip Code 43615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.77	

Full Name (Last, First, Middle Initial) B. MONICA NINO		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 1807 BROWNSTONE BLVD APT 403		Transaction ID: SA11A1.75813
City TOLEDO	State OH	Zip Code 43614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 281.25	

Full Name (Last, First, Middle Initial) C. DANNY NORTON		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 525 HAMPTON AVENUE		Transaction ID: SA11A1.75682
City TOLEDO	State OH	Zip Code 43609-2937
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

SUBTOTAL of Receipts This Page (optional)	▶	55.77
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 53 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
DANNY NORTON

Mailing Address 525 HAMPTON AVENUE

City TOLEDO State OH Zip Code 43609-2937

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

Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 207.72

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

Transaction ID: SA11A1.75794

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
MARLENE OVERTON

Mailing Address 1756 FREEMAN ST

City TOLEDO State OH Zip Code 43606-4445

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

Name of Employer JAC PRODUCTS, INC. Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

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

Transaction ID: SA11A1.75611

Amount of Each Receipt this Period
31.25

C. Full Name (Last, First, Middle Initial)
ROBERT H OWENS, JR.

Mailing Address 309 TEAKWOOD DR

City MONROE State LA Zip Code 71203-2248

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 2 8 / 2 0 0 6

Transaction ID: SA11A1.76023

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	▶	67.02
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. LILLIE PACK		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1302 WAVERLY		Transaction ID: SA11A1.75847	
City State Zip Code TOLEDO OH 43607		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 281.25	

Full Name (Last, First, Middle Initial) B. CONNIE E PARRA		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 629 BARRON WAY		Transaction ID: SA11A1.75671	
City State Zip Code HAYWARD CA 94544-6801		Amount of Each Receipt this Period 27.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation NEW UNITED MOTORS MFG FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) C. DAWN PAUKEN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 866 ATLANTIC AVE		Transaction ID: SA11A1.75526	
City State Zip Code TOLEDO OH 43609		Amount of Each Receipt this Period 6.25	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	58.25
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 55 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. DAVID PHEILS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 334 COLONY RD		Transaction ID: SA11A1.75468	
City ROSSFORD	State OH	Zip Code 43460-1039	Amount of Each Receipt this Period 5.77
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

Full Name (Last, First, Middle Initial) B. DAVID PHEILS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 334 COLONY RD		Transaction ID: SA11A1.75469	
City ROSSFORD	State OH	Zip Code 43460-1039	Amount of Each Receipt this Period 5.77
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72		

Full Name (Last, First, Middle Initial) C. JEFF PLOTT		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 1 / 2 0 0 6	
Mailing Address 112 POLARIS DRIVE		Transaction ID: SA11A1.76042	
City MOCKSVILLE	State NC	Zip Code 27828	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	311.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. LORETTA POELLNITZ		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 631 LUCAS		Transaction ID: SA11A1.75521	
City State Zip Code TOLEDO OH 43602		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 281.25	

Full Name (Last, First, Middle Initial) B. ANTHONY R RAINEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 3927 N 58TH ST.		Transaction ID: SA11A1.75784	
City State Zip Code MILWAUKEE WI 53216-2230		Amount of Each Receipt this Period 8.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AMERICAN BRANDS FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 289.00	

Full Name (Last, First, Middle Initial) C. ANTHONY R RAINEY		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 3927 N 58TH ST.		Transaction ID: SA11A1.75902	
City State Zip Code MILWAUKEE WI 53216-2230		Amount of Each Receipt this Period 8.50	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation AMERICAN BRANDS FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 297.50	

SUBTOTAL of Receipts This Page (optional) ▶	42.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

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

Mailing Address 3927 N 58TH ST.

City State Zip Code
MILWAUKEE WI 53216-2230

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

Name of Employer Occupation
AMERICAN BRANDS FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 306.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.76010

Amount of Each Receipt this Period
8.50

B. Full Name (Last, First, Middle Initial)
CARL G RALPH

Mailing Address 4481 COUNTY ROAD 1718

City State Zip Code
HOLLY POND AL 35083-5636

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

Name of Employer Occupation
SIEMENS AG FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75542

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
BENJAMIN G. RIVERA

Mailing Address 1375 SALUDA CT.

City State Zip Code
SAN JOSE CA 95121-2260

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

Name of Employer Occupation
NEW UNITED MOTORS MFG FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 224.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75830

Amount of Each Receipt this Period
28.00

SUBTOTAL of Receipts This Page (optional)	▶	61.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. EDUARDO RODRIQUEZ		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1121 EARLWOOD AVE		Transaction ID: SA11A1.75530	
City State Zip Code OREGON OH 43616-2709		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. EDUARDO RODRIQUEZ		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1121 EARLWOOD AVE		Transaction ID: SA11A1.75689	
City State Zip Code OREGON OH 43616-2709		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. RANDELL C ROGERS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address P O BOX 67		Transaction ID: SA11A1.75949	
City State Zip Code BRIDGEPORT AL 35740-0067		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation SIEMENS AG FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 225.00	

SUBTOTAL of Receipts This Page (optional) ▶	36.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ROBERT ROHRS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 147 JENNINGS		Transaction ID: SA11A1.75725
City State Zip Code ROSSFORD OH 43460	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.75	

Full Name (Last, First, Middle Initial) B. PAULETTE ROTHSCHILD		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6
Mailing Address 1347 HOUSTON AVENUE		Transaction ID: SA11A1.75884
City State Zip Code STOCKTON CA 95206-2818	Amount of Each Receipt this Period 27.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) C. SHANE SACK		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6
Mailing Address 6110 GRAND BLANC RD		Transaction ID: SA11A1.76076
City State Zip Code SWARTZ CREEK MI 48473-9442	Amount of Each Receipt this Period 250.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 710.00	

SUBTOTAL of Receipts This Page (optional) ▶	302.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
WANDA S SALVATELLI

Mailing Address **4 GARVEY LANE**

City **NEWARK** State **DE** Zip Code **19702**

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

Name of Employer **DAIMLERCHRYSLER** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **325.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75712

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MICHAEL SAMPSEL

Mailing Address **704 PARKER AVENUE**

City **TOLEDO** State **OH** Zip Code **43605-2714**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.95**

Date of Receipt
 M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75726

Amount of Each Receipt this Period
5.77

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

Mailing Address **704 PARKER AVENUE**

City **TOLEDO** State **OH** Zip Code **43605-2714**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.72**

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

Transaction ID: SA11A1.75727

Amount of Each Receipt this Period
5.77

SUBTOTAL of Receipts This Page (optional)	36.54
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. FELIPE E SANCHEZ		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 721 GLENCREEK DR.		Transaction ID: SA11A1.76041	
City State Zip Code TRACY CA 95377-8224	Amount of Each Receipt this Period 30.00		
FEC ID number of contributing federal political committee. C			
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. BRADLEY R SCHWANDA		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 4 / 2 0 0 6	
Mailing Address 2009 E FOREST HILL AVENUE		Transaction ID: SA11A1.75528	
City State Zip Code OAK CREEK WI 53154-3123	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.75		

Full Name (Last, First, Middle Initial) C. BRADLEY R SCHWANDA		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 2009 E FOREST HILL AVENUE		Transaction ID: SA11A1.75795	
City State Zip Code OAK CREEK WI 53154-3123	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 297.50		

SUBTOTAL of Receipts This Page (optional) ▶	47.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. BRADLEY R SCHWANDA		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 7 / 2 0 0 6	
Mailing Address 2009 E FOREST HILL AVENUE		Transaction ID: SA11A1.75470	
City State Zip Code OAK CREEK WI 53154-3123	Amount of Each Receipt this Period 8.75		
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 306.25		

Full Name (Last, First, Middle Initial) B. STANLEY W SEABERT		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 14 E ELM ST		Transaction ID: SA11A1.75559	
City State Zip Code FOREST OH 45843	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer OCCIDENTAL PETROLEUM CORP	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00		

Full Name (Last, First, Middle Initial) C. TERRY L SELL		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1558 OAKDALE DR.		Transaction ID: SA11A1.75691	
City State Zip Code POTTSTOWN PA 19464-2758	Amount of Each Receipt this Period 14.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DANA CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		

SUBTOTAL of Receipts This Page (optional) ▶	47.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

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

Full Name (Last, First, Middle Initial) A. REGINA SHINAUL		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 1752 TECUMSEH		Transaction ID: SA11A1.75677	
City State Zip Code TOLEDO OH 43607		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. REGINA SHINAUL		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1752 TECUMSEH		Transaction ID: SA11A1.75678	
City State Zip Code TOLEDO OH 43607		Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation JOHNSON CONTROLS INC FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. MICHAEL SIDERS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 7107 WOLF AVENUE		Transaction ID: SA11A1.75762	
City State Zip Code CLEVELAND OH 44129-2300		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation ALCOA INC. FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	36.54
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
ARMOND SMITH

Mailing Address 5863 N MCNEIL RD

City SAINT JOHNS State MI Zip Code 48879-9445

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

Name of Employer FEDERAL MOGUL CORP Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.75984

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
MITCHELL SMITH

Mailing Address 800 AMELIA ROAD

City LOCUST GROVE State GA Zip Code 30248

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

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

Transaction ID: SA11A1.75755

Amount of Each Receipt this Period
75.00

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

Mailing Address 937 FAIRFIELD AVE

City TEMPERANCE State MI Zip Code 48182-9276

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

Transaction ID: SA11A1.75776

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	400.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. GEORGE SOLANDER		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address PO BOX 597		Transaction ID: SA11A1.76034	
City FLAT ROCK	State OH	Zip Code 44828-0597	Amount of Each Receipt this Period 50.00
FEC ID number of contributing federal political committee. C			
Name of Employer BELLEVUE MFG CO	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00		

Full Name (Last, First, Middle Initial) B. FRANK SOUZA		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 33887 FLORA SPRINGS ST		Transaction ID: SA11A1.75493	
City TEMECULA	State CA	Zip Code 92592	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer BOEING	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

Full Name (Last, First, Middle Initial) C. C Stanley		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 12390 FM 730 N		Transaction ID: SA11A1.76046	
City AZLE	State TX	Zip Code 76020-5240	Amount of Each Receipt this Period 80.00
FEC ID number of contributing federal political committee. C			
Name of Employer VOUGHT AIRCRAFT COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00		

SUBTOTAL of Receipts This Page (optional) ▶	430.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. STEPHEN J STEPHENS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 2853 SCOTTWOOD AVE		Transaction ID: SA11A1.75474
City TOLEDO State OH Zip Code 43610-1629	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95

Full Name (Last, First, Middle Initial) B. STEPHEN J STEPHENS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 2853 SCOTTWOOD AVE		Transaction ID: SA11A1.76022
City TOLEDO State OH Zip Code 43610-1629	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72

Full Name (Last, First, Middle Initial) C. MONICA STUDEBAKER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 1027 RIVERBEND BLVD		Transaction ID: SA11A1.75473
City SIDNEY State OH Zip Code 45365-2229	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 87.50
Name of Employer LEAR CORPORATION Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 226.47

SUBTOTAL of Receipts This Page (optional)	99.04
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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

Full Name (Last, First, Middle Initial) A. JEFFREY SWALLOW		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 525 LINDSEY RD.		Transaction ID: SA11A1.75738
City PIQUA	State OH	Zip Code 45356-9608
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75	

Full Name (Last, First, Middle Initial) B. NATHAN SWANK		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6
Mailing Address 315 2ND ST.		Transaction ID: SA11A1.75584
City PIQUA	State OH	Zip Code 45356-4017
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 87.50
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25	

Full Name (Last, First, Middle Initial) C. TANYA TAYLOR		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 538 NEBRASKA		Transaction ID: SA11A1.75579
City TOLEDO	State OH	Zip Code 43602
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.75	

SUBTOTAL of Receipts This Page (optional)	212.50
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
JONATHON TOEPFER

Mailing Address 819 GLENWOOD RD APT 8

City State Zip Code
ROSSFORD OH 43460

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.25

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

Transaction ID: SA11A1.75688

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
SUSAN S TOLLEFSON

Mailing Address 1210 LOGAN ST

City State Zip Code
MARQUETTE MI 49855-2532

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

Name of Employer Occupation
NORTHERN MICHIGAN UNIVERSITY CLERK

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 1 / 3 0 / 2 0 0 6

Transaction ID: SA11A1.76078

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
ARTURO G TORRES

Mailing Address 22540 SANTA CLARA ST.

City State Zip Code
HAYWARD CA 94541-6234

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

Name of Employer Occupation
NEW UNITED MOTORS MFG FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 2 / 0 4 / 2 0 0 6

Transaction ID: SA11A1.75517

Amount of Each Receipt this Period
27.00

SUBTOTAL of Receipts This Page (optional)	352.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 69 / 95
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial) RAY TREVINO		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 7 / 2 0 0 6
Mailing Address 110 LEWIS ST		Transaction ID: SA11A1.75704
City State Zip Code SAINT JOHNS MI 48879-1056	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FEDERAL MOGUL CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

B. Full Name (Last, First, Middle Initial) DWIGHT TROESKEN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 851 CLARK STREET		Transaction ID: SA11A1.75804
City State Zip Code TOLEDO OH 43605	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 268.75	

C. Full Name (Last, First, Middle Initial) RONNEY TUCK		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 1241 AVONDALE AVE		Transaction ID: SA11A1.75971
City State Zip Code TOLEDO OH 43607-4168	Amount of Each Receipt this Period 5.77	
FEC ID number of contributing federal political committee. C		
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

SUBTOTAL of Receipts This Page (optional) ▶	55.77
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. RONNEY TUCK		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 1241 AVONDALE AVE		Transaction ID: SA11A1.75483	
City TOLEDO	State OH	Amount of Each Receipt this Period 5.77	
Zip Code 43607-4168			
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72		

Full Name (Last, First, Middle Initial) B. JOE L TURNBOUGH, JR.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 5 / 2 0 0 6	
Mailing Address 621 MORAN AVENUE		Transaction ID: SA11A1.75568	
City TOLEDO	State OH	Amount of Each Receipt this Period 5.77	
Zip Code 43607-2839			
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95		

Full Name (Last, First, Middle Initial) C. JOE L TURNBOUGH, JR.		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 621 MORAN AVENUE		Transaction ID: SA11A1.75955	
City TOLEDO	State OH	Amount of Each Receipt this Period 5.77	
Zip Code 43607-2839			
FEC ID number of contributing federal political committee. C			
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72		

SUBTOTAL of Receipts This Page (optional) ▶	17.31
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. CECIL VAUGHAN		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 411 N. DELAWARE		Transaction ID: SA11A1.75987	
City INDEPENDENCE	State MO	Amount of Each Receipt this Period 100.00	
Zip Code 64050			
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00		

Full Name (Last, First, Middle Initial) B. JANENE J. WATSON		Date of Receipt M M / D D / Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 813 ARROWHEAD DR. APT. A		Transaction ID: SA11A1.75731	
City SIDNEY	State OH	Amount of Each Receipt this Period 93.75	
Zip Code 45365-1826			
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50		

Full Name (Last, First, Middle Initial) C. SCOTT WATTS		Date of Receipt M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 2808 PAMELA PLACE		Transaction ID: SA11A1.75494	
City MINDEN	State NV	Amount of Each Receipt this Period 300.00	
Zip Code 89423			
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	493.75
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. ANTHONY WESTERHEIDE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 210 W. WALNUT		Transaction ID: SA11A1.75917	
City State Zip Code ANNA OH 45302	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75		

Full Name (Last, First, Middle Initial) B. CHRISTOPHER WIGGINS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 1 1 / 2 0 0 6	
Mailing Address 716 PARK ST.		Transaction ID: SA11A1.75809	
City State Zip Code SIDNEY OH 45365-1238	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75		

Full Name (Last, First, Middle Initial) C. JAMES R WILDE		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6	
Mailing Address 14726 ST. RT. 111		Transaction ID: SA11A1.75869	
City State Zip Code DEFIANCE OH 43512	Amount of Each Receipt this Period 18.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DEFIANCE PRECISION PRODUCTS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.00		

SUBTOTAL of Receipts This Page (optional) ▶	218.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 95
	<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	

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

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

Full Name (Last, First, Middle Initial) A. JAMES A WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 9083 W WESTON RD		Transaction ID: SA11A1.75585
City MORENCI	State MI	Zip Code 49256-9592
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) B. JAMES A WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 9083 W WESTON RD		Transaction ID: SA11A1.75976
City MORENCI	State MI	Zip Code 49256-9592
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

Full Name (Last, First, Middle Initial) C. ROBIN WILLIAMS		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 949 FRIES		Transaction ID: SA11A1.75482
City TOLEDO	State OH	Zip Code 43609-1013
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 12.50
Name of Employer ST VINCENT MERCY MEDICAL CEN	Occupation TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.50	

SUBTOTAL of Receipts This Page (optional)	▶	24.04
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 95
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
JASON WILSON

Mailing Address **9636 COUNTY ROAD H**

City **DELTA** State **OH** Zip Code **43515-9633**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **201.95**

Date of Receipt
M M / D D / Y Y Y Y
12 / 05 / 2006

Transaction ID: SA11A1.75621

Amount of Each Receipt this Period
5.77

B. Full Name (Last, First, Middle Initial)
JASON WILSON

Mailing Address **9636 COUNTY ROAD H**

City **DELTA** State **OH** Zip Code **43515-9633**

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

Name of Employer **JOHNSON CONTROLS INC** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **207.72**

Date of Receipt
M M / D D / Y Y Y Y
12 / 06 / 2006

Transaction ID: SA11A1.76007

Amount of Each Receipt this Period
5.77

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

Mailing Address **307 E. 4TH ST.**

City **MINSTER** State **OH** Zip Code **45865-1312**

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **237.50**

Date of Receipt
M M / D D / Y Y Y Y
12 / 11 / 2006

Transaction ID: SA11A1.75582

Amount of Each Receipt this Period
93.75

SUBTOTAL of Receipts This Page (optional)	105.29
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 75 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. JAMES WOODALL		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 1 / 2 0 0 6
Mailing Address 536 SADDLEHORN DRIVE		Transaction ID: SA11A1.75878
City State Zip Code CHESAPEAKE VA 23322	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 300.00
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. RONALD YODER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 5 / 2 0 0 6
Mailing Address 624 LEXINGTON AVENUE		Transaction ID: SA11A1.75642
City State Zip Code FOSTORIA OH 44830-2713	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 201.95	

Full Name (Last, First, Middle Initial) C. RONALD YODER		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 0 6 / 2 0 0 6
Mailing Address 624 LEXINGTON AVENUE		Transaction ID: SA11A1.75533
City State Zip Code FOSTORIA OH 44830-2713	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 5.77
Name of Employer JOHNSON CONTROLS INC	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.72	

SUBTOTAL of Receipts This Page (optional)	311.54
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 76 / 95
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
 GREGORY ZEIGLER

Mailing Address 103 DAMASCUS STREET
 PO BOX 134

City State Zip Code
 LIBERTY CTR. OH 43532

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

Name of Employer Occupation
 JOHNSON CONTROLS INC FACTORY WORKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 201.95

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.75746

Amount of Each Receipt this Period
 5.77

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

Mailing Address 103 DAMASCUS STREET
 PO BOX 134

City State Zip Code
 LIBERTY CTR. OH 43532

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

Name of Employer Occupation
 JOHNSON CONTROLS INC FACTORY WORKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 207.72

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

Transaction ID: SA11A1.75920

Amount of Each Receipt this Period
 5.77

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

Mailing Address 821 EVERGREEN DR.

City State Zip Code
 SIDNEY OH 45365-3452

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

Name of Employer Occupation
 LEAR CORPORATION FACTORY WORKER

Receipt For: Aggregate Year-to-Date ▼
 Primary General
 Other (specify) ▼ 237.50

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

Transaction ID: SA11A1.75630

Amount of Each Receipt this Period
 93.75

SUBTOTAL of Receipts This Page (optional)	105.29
TOTAL This Period (last page this line number only)	10947.38

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 77 / 95
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 12	<input checked="" type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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

A. Full Name (Last, First, Middle Initial)
RANGEL FOR CONGRESS

Mailing Address **PO BOX 5577**

City **NEW YORK** State **NY** Zip Code **10027**

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

Name of Employer Occupation

Receipt For: 2006
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

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

Transaction ID: SA16.76103

Amount of Each Receipt this Period
1000.00

Refund due to Candidate
 Reallocation con

SUBTOTAL of Receipts This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	1000.00

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 78 / 95
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) A. Bank One		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76089	
City State Zip Code Detroit MI 48232	Amount of Each Receipt this Period 3212.19		
FEC ID number of contributing federal political committee. C		INTEREST ON CHECKING	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 56729.91		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. Bank One		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76091	
City State Zip Code Detroit MI 48232	Amount of Each Receipt this Period 40.90		
FEC ID number of contributing federal political committee. C		INTEREST ON CHECKING	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 56770.81		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. Bank One		Date of Receipt M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76093	
City State Zip Code Detroit MI 48232	Amount of Each Receipt this Period 85.83		
FEC ID number of contributing federal political committee. C		INTEREST ON CHECKING	
Name of Employer Occupation	Aggregate Year-to-Date ▼ 56856.64		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	3338.92
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 79 / 95
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 3 0 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76095	
City Detroit	State MI	Zip Code 48232	Amount of Each Receipt this Period 93.19
FEC ID number of contributing federal political committee. C		INTEREST ON CHECKING	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 56949.83		

Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76090	
City Detroit	State MI	Zip Code 48232	Amount of Each Receipt this Period 3207.55
FEC ID number of contributing federal political committee. C		ITNEREST ON CHECKING	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60157.38		

Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 1 2 / 3 1 / 2 0 0 6	
Mailing Address PO Box 206A		Transaction ID: SA17.76092	
City Detroit	State MI	Zip Code 48232	Amount of Each Receipt this Period 39.55
FEC ID number of contributing federal political committee. C		INTEREST ON CHECKING	
Name of Employer	Occupation		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 60196.93		

SUBTOTAL of Receipts This Page (optional) ▶	3340.29
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 80 / 95
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17	

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

A. Full Name (Last, First, Middle Initial)
 Bank One

Mailing Address PO Box 206A

City State Zip Code
 Detroit MI 48232

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 60300.97

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 6

Transaction ID: SA17.76094

Amount of Each Receipt this Period
 104.04

INTEREST ON CHECKING

B. Full Name (Last, First, Middle Initial)
 Bank One

Mailing Address PO Box 206A

City State Zip Code
 Detroit MI 48232

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼
 60397.83

Date of Receipt
 M M / D D / Y Y Y Y Y
 1 2 / 3 1 / 2 0 0 6

Transaction ID: SA17.76096

Amount of Each Receipt this Period
 96.86

INTEREST ON CHECKING

SUBTOTAL of Receipts This Page (optional)	▶	200.90
TOTAL This Period (last page this line number only)	▶	6880.11

**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 81 / 95

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

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

Full Name (Last, First, Middle Initial) A. WILLIAM ADOLPH		Transaction ID: SB21B.75240	
Mailing Address 11490 ELY		Date of Disbursement MM / DD / YYYY 12 / 14 / 2006	
City DAVISBURG	State MI	Zip Code 48350	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Bank One		Transaction ID: SB21B.75441	
Mailing Address PO Box 206A		Date of Disbursement MM / DD / YYYY 12 / 19 / 2006	
City Detroit	State MI	Zip Code 48232	Amount of Each Disbursement this Period 840.00
Purpose of Disbursement FED TX WD/T WILSON/945 4TH QTR		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Bank One		Transaction ID: SB21B.75442	
Mailing Address PO Box 206A		Date of Disbursement MM / DD / YYYY 12 / 19 / 2006	
City Detroit	State MI	Zip Code 48232	Amount of Each Disbursement this Period 1400.00
Purpose of Disbursement FED TX WD/JOHNSTONE/945 4TH QT		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	2740.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 82 / 95

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

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

Full Name (Last, First, Middle Initial) A. Bank One		Transaction ID: SB21B.75446 Date of Disbursement																					
Mailing Address PO Box 206A		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	9		2	0	0	6														
City Detroit	State MI	Zip Code 48232	Amount of Each Disbursement this Period																				
Purpose of Disbursement FED TX WD/J GORSICK/945 4TH QT		Category/ Type	560.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. DON BASNIGHT		Transaction ID: SB21B.75234 Date of Disbursement																					
Mailing Address 14834 ROBSON ST.		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		1	4		2	0	0	6														
City DETROIT	State MI	Zip Code 48227	Amount of Each Disbursement this Period																				
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		Category/ Type	500.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. DAN RODGERS SPORTING GOODS		Transaction ID: SB21B.75452 Date of Disbursement																					
Mailing Address 5340 MONROE STREET		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		2	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2		2	0		2	0	0	6														
City TOLEDO	State OH	Zip Code 43623	Amount of Each Disbursement this Period																				
Purpose of Disbursement R2B INV #33565 V-CAP JACKETS		Category/ Type	3362.63																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	4422.63
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. WADE GINGELL		Transaction ID: SB21B.75250 Date of Disbursement 12 / 14 / 2006
Mailing Address 6830 NORTH LAKE		Amount of Each Disbursement this Period 500.00
City OTTER LAKE	State MI Zip Code 48464	
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. JOSEPH GORSICK		Transaction ID: SB21B.75445 Date of Disbursement 12 / 19 / 2006
Mailing Address 2512 REGAL ROAD		Amount of Each Disbursement this Period 2000.00
City LA GRANGE	State KY Zip Code 40031	
Purpose of Disbursement REGION 3 V-CAP DRAWING		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. HELINA'S CATERING		Transaction ID: SB21B.75451 Date of Disbursement 12 / 20 / 2006
Mailing Address 3164 CANYON OAKS TRAIL		Amount of Each Disbursement this Period 1325.00
City MILFORD	State MI Zip Code 48380	
Purpose of Disbursement V-CAP R1A KICK-OFF LUNCHEON		Category/ Type
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	3825.00
TOTAL This Period (last page this line number only) ▶

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. IMPRESSIONS SPECIALITY ADVERTISING		Transaction ID: SB21B.75229 Date of Disbursement
Mailing Address 8914 S. TELEGRAPH ROAD		<input type="text" value="1"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City TAYLOR	State MI	Zip Code 48180
Purpose of Disbursement INV#84203 REG 1A SWEATSHIRTS		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="4545.33"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. IMPRESSIONS SPECIALITY ADVERTISING		Transaction ID: SB21B.75232 Date of Disbursement
Mailing Address 8914 S. TELEGRAPH ROAD		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City TAYLOR	State MI	Zip Code 48180
Purpose of Disbursement REGION 1A PROMOTION INV 84835		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="2149.20"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. IMPRESSIONS SPECIALITY ADVERTISING		Transaction ID: SB21B.75433 Date of Disbursement
Mailing Address 8914 S. TELEGRAPH ROAD		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/>
City TAYLOR	State MI	Zip Code 48180
Purpose of Disbursement REGION 1A PROMOTION-INV #85044		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="127.20"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6821.73"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. IMPRESSIONS SPECIALITY ADVERTISING		Transaction ID: SB21B.75440 Date of Disbursement																				
Mailing Address 8914 S. TELEGRAPH ROAD		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	9		2	0	0	6													
City TAYLOR	State MI	Zip Code 48180																				
Purpose of Disbursement REGION 1A PROMOTION-INV #85051		Amount of Each Disbursement this Period <table border="1"><tr><td>186.03</td></tr></table>	186.03																			
186.03																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

Full Name (Last, First, Middle Initial) B. M. JOHNSTONE		Transaction ID: SB21B.75449 Date of Disbursement																				
Mailing Address 209 E. HIGHLAND AVE., #2		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	9		2	0	0	6													
City MARION	State IN	Zip Code 46953																				
Purpose of Disbursement REGION 3 V-CAP DRAWING		Amount of Each Disbursement this Period <table border="1"><tr><td>5000.00</td></tr></table>	5000.00																			
5000.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

Full Name (Last, First, Middle Initial) C. LEONARD LUKASZEWSKI		Transaction ID: SB21B.75246 Date of Disbursement																				
Mailing Address 13535 ALLYN DR.		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	4		2	0	0	6													
City HUDSON	State FL	Zip Code 34667																				
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		Amount of Each Disbursement this Period <table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>5686.03</td></tr></table>	5686.03
5686.03		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. AUGUSTO MASSIE		Transaction ID: SB21B.75248 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 3514 ISABELLE ST.		Amount of Each Disbursement this Period 500.00
City INKSTER State MI Zip Code 48141	Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. NICK O'SHEA		Transaction ID: SB21B.75242 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 28455 N. CLEMENTS CIRCLE		Amount of Each Disbursement this Period 500.00
City LIVONIA State MI Zip Code 48150	Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. JOHN RIZZO		Transaction ID: SB21B.75244 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 30244 TECLA		Amount of Each Disbursement this Period 500.00
City WARREN State MI Zip Code 48088	Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	1500.00
TOTAL This Period (last page this line number only) ▶	_____

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. ELI TACKETT		Transaction ID: SB21B.75236 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 4 / 2 0 0 6
Mailing Address 235 MEADOWBROOK DR.		Amount of Each Disbursement this Period 500.00
City STANFORD State KY Zip Code 40484	Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. UAW LOCAL 19		Transaction ID: SB21B.75231 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 4330 STAFFORD		Amount of Each Disbursement this Period 11793.44
City GRAND RAPIDS State MI Zip Code 49548	Purpose of Disbursement REIMBRB TEMP POLITICAL COORD	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. UAW LOCAL 2093		Transaction ID: SB21B.76073 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 15802 HOFFMAN RD.		Amount of Each Disbursement this Period 8824.80
City THREE RIVERS State MI Zip Code 49093	Purpose of Disbursement REIMBRSE TEMP POLITAL COORD	
Candidate Name		Category/Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	21118.24
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. UAW LOCAL 2093		Transaction ID: SB21B.76074 Date of Disbursement																				
Mailing Address 15802 HOFFMAN RD.		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	3		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	3		2	0	0	6													
City THREE RIVERS	State MI	Zip Code 49093																				
Purpose of Disbursement REIMBRS TEMP POLITICAL COORD		Amount of Each Disbursement this Period <table border="1"><tr><td>2503.78</td></tr></table>	2503.78																			
2503.78																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) B. CLEO VALLIENT		Transaction ID: SB21B.75340 Date of Disbursement																				
Mailing Address 3683 CHARLEVOIX ST.		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	4		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	4		2	0	0	6													
City DETROIT	State MI	Zip Code 48207																				
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		Amount of Each Disbursement this Period <table border="1"><tr><td>500.00</td></tr></table>	500.00																			
500.00																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

Full Name (Last, First, Middle Initial) C. VIZUAL EXPRESS		Transaction ID: SB21B.75434 Date of Disbursement																				
Mailing Address 440 E. CENTER STREET		<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	9		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y													
1	2		1	9		2	0	0	6													
City MARION	State OH	Zip Code 43302																				
Purpose of Disbursement R2B INV #6869 V-CAP WINDSHIRTS		Amount of Each Disbursement this Period <table border="1"><tr><td>3100.94</td></tr></table>	3100.94																			
3100.94																						
Candidate Name																						
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					
State: District:	Category/ Type																					

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>6104.72</td></tr></table>	6104.72
6104.72		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. VIZUAL EXPRESS		Transaction ID: SB21B.75435 Date of Disbursement
Mailing Address 440 E. CENTER STREET		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City MARION	State OH	Zip Code 43302
Purpose of Disbursement R2B INV #6708 V-CAP RINGS		<input type="text" value="9455.73"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. TRACY WILSON		Transaction ID: SB21B.75439 Date of Disbursement
Mailing Address 10974 N. LITTLE POINT ROAD		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City STILESVILLE	State IN	Zip Code 46180
Purpose of Disbursement REGION 3 V-CAP DRAWING		<input type="text" value="3000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. BENNIE WORSHAM		Transaction ID: SB21B.75238 Date of Disbursement
Mailing Address 19459 ORLEANS		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City DETROIT	State MI	Zip Code 48203
Purpose of Disbursement 06 DOLLAR DRIVE DRAWING WINNER		<input type="text" value="500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="12955.73"/>
TOTAL This Period (last page this line number only)	<input type="text" value="65174.08"/>

**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 90 / 95

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

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

Full Name (Last, First, Middle Initial) A. CIRO RODRIGUEZ FOR CONGRESS		Transaction ID: SB23.75459	
Mailing Address P O BOX 14528		Date of Disbursement 11 / 29 / 2006	
City SAN ANTONIO	State TX	Zip Code 78214	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement CIRO RODRIGUEZ		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼		
State: TX District: 28	Runoff		

Full Name (Last, First, Middle Initial) B. CITIZENS FOR HARKIN		Transaction ID: SB23.75456	
Mailing Address 426 C STREET, NE		Date of Disbursement 12 / 19 / 2006	
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement TOM HARKIN		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: IA District:	Runoff		

Full Name (Last, First, Middle Initial) C. COMMITTEE TO ELECT CAROL GAY		Transaction ID: SB23.76098	
Mailing Address 19 MAIN STREET		Date of Disbursement 11 / 28 / 2006	
City TOMS RIVER	State NJ	Zip Code 08753	Amount of Each Disbursement this Period -5000.00
Purpose of Disbursement VOIDED CONTRIBUTION CK#27583 DTD 11/2/06		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 04	Runoff		

SUBTOTAL of Disbursements This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. COMMITTEE TO RE-ELECT NYDIA VELAZQUEZ		Transaction ID: SB23.76097																					
Mailing Address 436 NEW JERSEY AVENUE SE		Date of Disbursement																					
City WASHINGTON State DC Zip Code 20003		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>2</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	2	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	1	2	/	2	0	0	6														
Purpose of Disbursement VOIDED CONTRIBUTION CK27574 DTD 10/26/06		Amount of Each Disbursement this Period																					
Candidate Name		-2000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: NY District: 12		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) B. EARL POMEROY FOR CONGRESS		Transaction ID: SB23.76100																					
Mailing Address PO BOX 75214		Date of Disbursement																					
City WASHINGTON State DC Zip Code 20013-5214		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	0	5	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	0	5	/	2	0	0	6														
Purpose of Disbursement VOIDED CONTRIBUTION CK#27611 DTD 11/6/06		Amount of Each Disbursement this Period																					
Candidate Name		-2000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: ND District: 01		<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																					

Full Name (Last, First, Middle Initial) C. FRIENDS OF MAZIE HIRONO		Transaction ID: SB23.75455																					
Mailing Address PO BOX 677		Date of Disbursement																					
City HONOLULU State HI Zip Code 96809		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>1</td><td>2</td><td>/</td><td>1</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	9	/	2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	2	/	1	9	/	2	0	0	6														
Purpose of Disbursement MAZIE HIRONO		Amount of Each Disbursement this Period																					
Candidate Name		4000.00																					
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2006																					
State: HI District: 02		<input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼																					
		Primary Debt HI																					

SUBTOTAL of Disbursements This Page (optional)	0.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. FRIENDS OF SENATOR CARL LEVIN		Transaction ID: SB23.75457 Date of Disbursement
Mailing Address 503 CAPITOL COURT NE SUITE 100		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement CARL LEVIN	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI District:		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) B. PERLMUTTER FOR CONGRESS		Transaction ID: SB23.75454 Date of Disbursement
Mailing Address 2545 YOUNGFIELD ST.		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City GOLDEN	State CO	Zip Code 80401
Purpose of Disbursement ED PERLMUTTER	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	
State: CO District: 07	Primary Debt OH	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

Full Name (Last, First, Middle Initial) C. SALAZAR FOR SENATE		Transaction ID: SB23.75453 Date of Disbursement
Mailing Address PO BOX 600		<input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City DENVER	State CO	Zip Code 80201-0600
Purpose of Disbursement KEN SALAZAR	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CO District:		
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

**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 93 / 95

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. TIM JOHNSON FOR SOUTH DAKOTA

Mailing Address 420 C STREET NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
TIM JOHNSON

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: SD District:

Transaction ID: SB23.75458

Date of Disbursement

11 / 29 / 2006

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

9000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial) A. AFL-CIO PCC		Transaction ID: SB29.76099 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 2 8 / 2 0 0 6
Mailing Address 815 16TH STREET		Amount of Each Disbursement this Period -5000.00
City WASHINGTON State DC Zip Code 20006	Category/ Type	
Purpose of Disbursement VOIDED CONTRIBUTION CK#27348 DTD 8/31/06		
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) ▼	

Full Name (Last, First, Middle Initial) B. INTERNATIONAL UNION, UAW		Transaction ID: SB29.75460 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 1 3 / 2 0 0 6
Mailing Address 8000 EAST JEFFERSON AVENUE		Amount of Each Disbursement this Period 659.40
City DETROIT State MI Zip Code 48214	Category/ Type	
Purpose of Disbursement EXCHG CK CANADIAN MUN CANDIDAT		
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) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

-4340.60

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

-4340.60

Image# 27980020648

Form/Schedule: **SA16** This refund is due to reallocation of our primary contribution by the candidate.

Transaction ID: **SA16.76103**

Form/Schedule: **SB29** Exchange check for contribution to Canadian Municipal candidate

Transaction ID: **SB29.75460**
