

**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**

CITY

STATE

ZIPCODE

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

04

01

2008

through

06

30

2008

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

07

15

2008

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

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

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	4	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2008</span>		10417813.33
(b) Cash on Hand at Beginning of Reporting Period .....	10629932.31	
(c) Total Receipts (from Line 19) .....	1066440.17	2583715.64
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	11696372.48	13001528.97
7. Total Disbursements (from Line 31) .....	1280801.02	2585957.51
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	10415571.46	10415571.46
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M M  
0 4D D  
0 1Y Y Y Y  
2 0 0 8

To:

M M  
0 6D D  
3 0Y Y Y Y  
2 0 0 8

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	24370.80	47253.80
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1033307.28	2519940.41
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	1057678.08	2567194.21
(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) ..... ➡	1057678.08	2567194.21
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 .....	2000.00	2000.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	6762.09	14521.43
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)) .....	1066440.17	2583715.64
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1066440.17	2583715.64

**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.....	240051.02	490504.51
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡	240051.02	490504.51
22. Transfers to Affiliated/Other Party Committees.....	500000.00	900000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	320750.00	659750.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	220000.00	535703.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	1280801.02	2585957.51
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1280801.02	2585957.51

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1057678.08	2567194.21
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1057678.08	2567194.21
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	240051.02	490504.51
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	240051.02	490504.51

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

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

FOR LINE NUMBER: PAGE 6 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MIKE ABELL

Mailing Address 3307 BARDSTOWN RD

City

SPRINGFIELD

State

KY

Zip Code

40069-9451

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  
0 4 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.93372

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL AILES

Mailing Address 3809 W CR 1275N

City

MUNCIE

State

IN

Zip Code

47303

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BORG WARNER

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  
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.93979

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

KENNETH ALEXANDER

Mailing Address 6254 W. PEMBRIDGE

City

TOLEDO

State

OH

Zip Code

43615

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.93787

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MELVIN BABB SR

Mailing Address 3206 HORNSEA RD

City

CHESAPEAKE

State

VA

Zip Code

23325

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93403

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DORTHENE BAILEY

Mailing Address 1500 HAMPSHIRE PIKE APT F1 APT

City

COLUMBIA

State

TN

Zip Code

38401-5699

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SATURN

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93908

Amount of Each Receipt this Period

1.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM BARBER

Mailing Address 218 RADER CT

City

OLIN

State

NC

Zip Code

28660

FEC ID number of contributing  
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93365

Amount of Each Receipt this Period

300.00

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

601.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

THOMAS M BARTH

Mailing Address 12805 SW NIGHT HERON LN

City

BEAVERTON

State

OR

Zip Code

97007

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93892

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

BUFORD BEARD

Mailing Address 1964 SUGAR RIDGE ROAD

City

SPRING HILL

State

TN

Zip Code

37174

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93376

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL C BELSITO

Mailing Address 3641 ALLIUM DR

City

HOLT

State

MI

Zip Code

48842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 652

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.93430

Amount of Each Receipt this Period

30.00

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

380.00

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



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

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

FOR LINE NUMBER: PAGE 9 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

ROY DON BEVIS

Mailing Address 226 PENNSYLVANIA AVENUE

City

LEBANON

State

TN

Zip Code

37087

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PEMCO AEROSPACE

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93393

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

RALPH E BISHOP

Mailing Address 8720 N JEFFERSON

City

KANSAS CITY

State

MO

Zip Code

64155

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.94002

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

FLOYD H BLAKE III

Mailing Address 1549 RIGBY RIDGE

City

UNION

State

MO

Zip Code

63084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93385

Amount of Each Receipt this Period

220.00

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

570.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

FLOYD H BLAKE III

Mailing Address 1549 RIGBY RIDGE

City

UNION

State

MO

Zip Code

63084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93917

Amount of Each Receipt this Period

55.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN BOWMAN

Mailing Address 1143 S PLYMOUTH CT  
UNIT 20

City

CHICAGO

State

IL

Zip Code

60605-2061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.94013

Amount of Each Receipt this Period

240.00

**C.**

Full Name (Last, First, Middle Initial)

KENNETH L BRADFORD

Mailing Address 3325 PETE SHAW RD

City

MARIETTA

State

GA

Zip Code

30066-2354

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93809

Amount of Each Receipt this Period

5.00

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

300.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 118

(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)

JAMES BURTON JR

Mailing Address 7242 STAHELIN AVE

City

DETROIT

State

MI

Zip Code

48228-3308

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEAR

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  
0 4 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.93428

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

BILLY J CASSTEVEENS

Mailing Address 12500 QUARTZ PL

City

OKLAHOMA CITY

State

OK

Zip Code

73170-5440

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93822

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL CAVANAUGH

Mailing Address 26330 JEFFERSON AVENUE

City

ST CLAIR SHORES

State

MI

Zip Code

48081-2429

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  
0 4 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.93377

Amount of Each Receipt this Period

300.00

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

825.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

FRED D CHARLES

Mailing Address 300 WATER STREET

City

LYONS

State

MI

Zip Code

48851-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS COPORATION

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  
0 4 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.93417

Amount of Each Receipt this Period

225.00

**B.**

Full Name (Last, First, Middle Initial)

FRED D CHARLES

Mailing Address 300 WATER STREET

City

LYONS

State

MI

Zip Code

48851-0246

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS COPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.93422

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

PATRICIA CLARK

Mailing Address 2054 EAST WELLSVIEW ROAD

City

CONNORSVILLE

State

IN

Zip Code

47331

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOMPKINS

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  
0 4 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.93406

Amount of Each Receipt this Period

300.00

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

550.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MILDRED COLLETTE

Mailing Address 720 WEST 600 SOUTH

City

ATLANTA

State

IN

Zip Code

46031

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORP

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93796

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

MAURICE DAVISON

Mailing Address 5331 HOLLY SPRINGS DR E

City

INDIANAPOLIS

State

IN

Zip Code

46254

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROLLS ROYCE

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  
0 4 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.93361

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

GORDON E DEANE

Mailing Address 8 S MAIN AVE

City

ALBANY

State

NY

Zip Code

12208-2618

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.93882

Amount of Each Receipt this Period

260.00

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

860.00

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

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

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

FOR LINE NUMBER: PAGE 14 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

DANIEL W DOMBEK

Mailing Address 672 RADFORD DR.

City

CLEVELAND

State

OH

Zip Code

44143

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALCOA

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  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.93956

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

JAMES J DOOLITTLE

Mailing Address 4821 S MINER RD

City

CARSON CITY

State

MI

Zip Code

48811

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 652

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.93432

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

HARVEY DURHAM

Mailing Address 1276 FIRST AVENUE

City

LAWRENCEBURG

State

TN

Zip Code

38464

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MURRAY, INC.

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  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.94200

Amount of Each Receipt this Period

300.00

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

625.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 118

(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)

DANIEL FAIRBANKS

Mailing Address 6302 LAROCQUE CIR

City

LANSING

State

MI

Zip Code

48917-9740

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 ▼

525.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	8

Transaction ID: SA11AI.93802

Amount of Each Receipt this Period

105.00

**B.**

Full Name (Last, First, Middle Initial)

MARK FERRELL

Mailing Address 6534 SANTA ANA LANE

City

INDIANAPOLIS

State

IN

Zip Code

46214-3388

FEC ID number of contributing  
federal political committee.

C

Name of Employer

NAVISTAR

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
0	5	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.93998

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

LARRY FLUKE

Mailing Address 59327 WHITE CLOUD CIRCLE

City

SOUTH BEND

State

IN

Zip Code

46614

FEC ID number of contributing  
federal political committee.

C

Name of Employer

AM GENERAL

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
0	5	/	0	7	/	2	0	0	8

Transaction ID: SA11AI.93897

Amount of Each Receipt this Period

300.00

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

705.00

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

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

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

FOR LINE NUMBER: PAGE 16 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

JAMES FOSTER

Mailing Address 7300 MURKINS RD

City

KANSAS CITY

State

MO

Zip Code

64133-7002

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 ▼

490.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93810

Amount of Each Receipt this Period

140.00

**B.**

Full Name (Last, First, Middle Initial)

GEORGE FOX

Mailing Address 3935 BETHLEHEM RD

City

SPRINGFIELD

State

TN

Zip Code

37172

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  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.94176

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City

GRAND PRAIRIE

State

TX

Zip Code

75051-3447

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 ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93886

Amount of Each Receipt this Period

150.00

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

590.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

SERGIO GONZALEZ

Mailing Address 7416 W BANTON CIR

City

NEW PALESTINE

State

IN

Zip Code

46163-8861

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93947

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DAVID GREEN

Mailing Address 132 GREEN BAY DR.

City

BOARDMAN

State

OH

Zip Code

44512-6235

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 9 / 2 0 0 8

Transaction ID: SA11AI.94188

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID GREGORY

Mailing Address 4895 E CO RD 600N

City

NEW CASTLE

State

IN

Zip Code

47362

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.94206

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MARY HARMON

Mailing Address 4475 S KANITA COVE

City

MEMPHIS

State

TN

Zip Code

38125

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93408

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

DEBORAH HASER

Mailing Address 13124 TURTLECREEK DRIVE

City

OKLAHOMA CITY

State

OK

Zip Code

73170-6805

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93818

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

KENNETH HOLLAND

Mailing Address 7453 EAST 65TH STREET

City

INDIANAPOLIS

State

IN

Zip Code

46256

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.93864

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

PHILLIP HOLMES

Mailing Address 1210 JOHNSON DR

City

FOSTORIA

State

OH

Zip Code

44830-4703

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.93971

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

EDWARD P HONSINGER JR

Mailing Address 42171 BRIARCLIFF CT

City

CANTON

State

MI

Zip Code

48187-3714

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 ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93978

Amount of Each Receipt this Period

200.00

**C.**

Full Name (Last, First, Middle Initial)

MARTIN HOWELL

Mailing Address 5000 WOOD HILL COURT

City

CRESTWOOD

State

KY

Zip Code

40014-9291

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  
0 5 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.93814

Amount of Each Receipt this Period

300.00

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

800.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 118

(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)

DIANA HROVATIN

Mailing Address 226 76TH STREET

City

RAYMOND

State

WI

Zip Code

53126

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHN DEERE WATERLOO

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	9	/	2	0	0	8

Transaction ID: SA11AI.93991

Amount of Each Receipt this Period

476.00

**B.**

Full Name (Last, First, Middle Initial)

GLENN H KAGE JR

Mailing Address 1154 SAPPINGTON BRIDGE RD

City

SULLIVAN

State

MO

Zip Code

63080

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 ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.93952

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

GENE KEENUM

Mailing Address 3819 PIPER BAY COVE

City

LAKELAND

State

TN

Zip Code

38002

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
0	5	/	0	1	/	2	0	0	8

Transaction ID: SA11AI.93916

Amount of Each Receipt this Period

300.00

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

826.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

KARL KLAUS

Mailing Address 1577 SCHWENK

City

POTTSTOWN

State

PA

Zip Code

19464-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DANA CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

631.25

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 1 / 2 0 0 8

Transaction ID: SA11AI.94153

Amount of Each Receipt this Period

31.25

**B.**

Full Name (Last, First, Middle Initial)

ELAINE LANTZ

Mailing Address 818 ELSBETH ST

City

DALLAS

State

TX

Zip Code

75208-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.93924

Amount of Each Receipt this Period

260.00

**C.**

Full Name (Last, First, Middle Initial)

GENE LANTZ

Mailing Address 818 ELSBETH

City

DALLAS

State

TX

Zip Code

75208

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93873

Amount of Each Receipt this Period

300.00

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

591.25

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

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

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

FOR LINE NUMBER: PAGE 22 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

BONNIE J LAURIA

Mailing Address 3913 MAES RD

City

WEST BRANCH

State

MI

Zip Code

48661-9691

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93426

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

FRANCIS LE MAY

Mailing Address 104 SOUTH MURPHY AVENUE

City

BRAZIL

State

IN

Zip Code

47834-8296

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.93382

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES LEVY

Mailing Address 1165 RED COAT LN

City

SPARTA

State

MI

Zip Code

49345-9472

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 ▼

385.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93987

Amount of Each Receipt this Period

25.00

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

625.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 118

(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)

WILLIAM LEYLAND II

Mailing Address 188 PORTMAN RD

City

BUTLER

State

PA

Zip Code

16002-9103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL

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
0	4	/	1	0	/	2	0	0	8

Transaction ID: SA11AI.93367

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM LEYLAND II

Mailing Address 188 PORTMAN RD

City

BUTLER

State

PA

Zip Code

16002-9103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL

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
0	5	/	0	9	/	2	0	0	8

Transaction ID: SA11AI.93767

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM LEYLAND II

Mailing Address 188 PORTMAN RD

City

BUTLER

State

PA

Zip Code

16002-9103

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AK STEEL

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	2	/	2	0	0	8

Transaction ID: SA11AI.93960

Amount of Each Receipt this Period

25.00

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

100.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

ALVIN D LLOYD SR

Mailing Address 7712 TRAPPE RD

City

BALTIMORE

State

MD

Zip Code

21224-3402

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93383

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

ALVIN D LLOYD SR

Mailing Address 7712 TRAPPE RD

City

BALTIMORE

State

MD

Zip Code

21224-3402

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1347.60

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93858

Amount of Each Receipt this Period

1047.60

**C.**

Full Name (Last, First, Middle Initial)

RALPH J LYKE

Mailing Address 143 FAY LANE

City

MINOA

State

NY

Zip Code

13116

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 ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93764

Amount of Each Receipt this Period

46.00

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

1393.60

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



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

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

FOR LINE NUMBER: PAGE 25 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

LYNEE MANCEWICZ

Mailing Address 19030 COUNTY ROAD 8

City

BRISTOL

State

IN

Zip Code

46507

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VINCENT BACH

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  
0 6 / 0 5 / 2 0 0 8

Transaction ID: SA11AI.94157

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

FRANK MARTIN

Mailing Address 7669 WINTERBERRY DRIVE

City

YOUNGSTOWN

State

OH

Zip Code

44512-4723

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93753

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN J MARTINEZ

Mailing Address 2567 EDEN EAST DR

City

NORTHWOOD

State

OH

Zip Code

43619

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.93783

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MARCIA MAYBERRY

Mailing Address 308 OVERLOOK PL

City

COLUMBIA

State

TN

Zip Code

38401-4900

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SATURN

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93893

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

SHEILA MCDANIEL

Mailing Address 718 RUNNING DEER DR

City

COLUMBIA

State

TN

Zip Code

38401-8002

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SATURN

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93927

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

D L MCGREEVY

Mailing Address 17109 E 49TH TER S

City

INDEPENDENCE

State

MO

Zip Code

64055-6310

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 ▼

356.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93912

Amount of Each Receipt this Period

102.00

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

202.00

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

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

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

FOR LINE NUMBER: PAGE 27 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM MCINTOSH

Mailing Address 2101 E PARK ST

City

MUNCIE

State

IN

Zip Code

47303-4178

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BORG WARNER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

299.95

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 8 / 2 0 0 8

Transaction ID: SA11AI.93778

Amount of Each Receipt this Period

298.95

**B.**

Full Name (Last, First, Middle Initial)

WESLEY S MC LAUGHLIN

Mailing Address 2212 N. 250 E. LOT # 18

City

KOKOMO

State

IN

Zip Code

46901

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93881

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID E MELLINGER

Mailing Address 7010 RAMONA

City

ALTA LOMA

State

CA

Zip Code

91701

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93903

Amount of Each Receipt this Period

50.00

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

398.95

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

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

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

FOR LINE NUMBER: PAGE 28 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

A MEMMO

Mailing Address 9715 LAKESHORE RD

City

ANGOLA

State

NY

Zip Code

14006

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93830

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

LARRY MOFFATT

Mailing Address 83 MOFFATT ROAD

City

MITCHELL

State

IN

Zip Code

47446

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.93398

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN C MORRIS

Mailing Address 1116 SOUTHWINDS DR

City

PORT ORANGE

State

FL

Zip Code

32129-7835

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  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93374

Amount of Each Receipt this Period

300.00

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

650.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 118

(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)

DAVID J MYERS

Mailing Address 200 WOODDALE AVE

City

NEW CASTLE

State

DE

Zip Code

19720-4736

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 4 / 2 0 0 8

Transaction ID: SA11AI.94257

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

EDWARD M NANNO

Mailing Address 4786 MAKYES RD.

City

SYRACUSE

State

NY

Zip Code

13215

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93896

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

KEITH NEARGARDNER

Mailing Address 7415 MEADOW VIOLET COURT

City

AVON

State

IN

Zip Code

46123

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93993

Amount of Each Receipt this Period

300.00

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

650.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

GERALDINE OCHOCINSKA

Mailing Address 175 ROBIN HILL

City

AMHERST

State

NY

Zip Code

14221-1515

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.93390

Amount of Each Receipt this Period

600.00

**B.**

Full Name (Last, First, Middle Initial)

YVETTE OGDEN

Mailing Address 18644 OHIO ST

City

DETROIT

State

MI

Zip Code

48221-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DETROIT OSTEOPATHIC HOSPI-  
TAL

Occupation

TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.94253

Amount of Each Receipt this Period

110.00

**C.**

Full Name (Last, First, Middle Initial)

YVETTE OGDEN

Mailing Address 18644 OHIO ST

City

DETROIT

State

MI

Zip Code

48221-2058

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DETROIT OSTEOPATHIC HOSPI-  
TAL

Occupation

TECHNICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.94254

Amount of Each Receipt this Period

60.00

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

770.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MARK PARKER

Mailing Address 207 LESLIE ST

City

LANSING

State

MI

Zip Code

48912-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 2256

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 8 / 2 0 0 8

Transaction ID: SA11AI.93429

Amount of Each Receipt this Period

125.00

**B.**

Full Name (Last, First, Middle Initial)

MARK PARKER

Mailing Address 207 LESLIE ST

City

LANSING

State

MI

Zip Code

48912-2720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 2256

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.93883

Amount of Each Receipt this Period

125.00

**C.**

Full Name (Last, First, Middle Initial)

DOROTHY A PATTON

Mailing Address 7865 NW ROANRIDGE ROAD, APT D

City

KANSAS

State

MO

Zip Code

64151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93758

Amount of Each Receipt this Period

50.00

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

300.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 118

(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)

DENNIS PAWLIK

Mailing Address 3 SHADYSIDE LN

City

LANCASTER

State

NY

Zip Code

14086-1157

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  
0 4 / 2 3 / 2 0 0 8

Transaction ID: SA11AI.93363

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIAM R PENDERGRASS

Mailing Address 333 MOORE RD

City

COOKEVILLE

State

TN

Zip Code

38506

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 1 / 2 0 0 8

Transaction ID: SA11AI.93373

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

CARL PERKINS JR

Mailing Address PO BOX 939

City

FAYETTE

State

OH

Zip Code

43521-0939

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.93370

Amount of Each Receipt this Period

150.00

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

750.00

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



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

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

FOR LINE NUMBER: PAGE 33 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

CARL PERKINS JR

Mailing Address PO BOX 939

City

FAYETTE

State

OH

Zip Code

43521-0939

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.93964

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

CARL PERKINS JR

Mailing Address PO BOX 939

City

FAYETTE

State

OH

Zip Code

43521-0939

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 ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 0 2 / 2 0 0 8

Transaction ID: SA11AI.94202

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

JEFFREY F PIETRZYK

Mailing Address 231 FAIRVIEW CT

City

GRAND ISLAND

State

NY

Zip Code

14072-2962

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.93932

Amount of Each Receipt this Period

300.00

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKE ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.93919

Amount of Each Receipt this Period

90.00

**B.**

Full Name (Last, First, Middle Initial)

SHEILA RADLOFF

Mailing Address 6402 LONG RIVER LANE

City

INDIANAPOLIS

State

IN

Zip Code

46221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEAR CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.93870

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

MELVIN REED

Mailing Address 6881 INDUSTRIAL LOOP

City

SHREVEPORT

State

LA

Zip Code

71129

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93838

Amount of Each Receipt this Period

300.00

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

690.00

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

**SCHEDULE A (FEC Form 3X)  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 118

(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)

HAROLD RIDENOUR SR

Mailing Address 11035 WHITEHALL RD

City

SMITHSBURG

State

MD

Zip Code

21783

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
0	4		2	1		2	0	0	8

Transaction ID: SA11AI.93397

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

WILLIE D ROBINSON

Mailing Address 6919 N. SUMMERFIELD DR.

City

INDIANAPOLIS

State

IN

Zip Code

46214

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 ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Transaction ID: SA11AI.93948

Amount of Each Receipt this Period

50.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES ROGERS

Mailing Address 305 N DELAWARE AVENUE

City

MARTINSBURG

State

WV

Zip Code

25401

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 ▼

705.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	4		2	0	0	8

Transaction ID: SA11AI.93770

Amount of Each Receipt this Period

630.00

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

980.00

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

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

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

FOR LINE NUMBER: PAGE 36 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

KAREN ROSENBERG

Mailing Address 46 BOW STREET

City

PROVIDENCE

State

RI

Zip Code

02905-3406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation  
CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.93977

Amount of Each Receipt this Period

520.00

**B.**

Full Name (Last, First, Middle Initial)

TERRY L SELL

Mailing Address 1558 OAKDALE DR.

City

POTTSTOWN

State

PA

Zip Code

19464-2758

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DANA CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

642.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.93412

Amount of Each Receipt this Period

14.00

**C.**

Full Name (Last, First, Middle Initial)

C G SHERWOOD

Mailing Address 3400 GLENBROOK DR

City

LANSING

State

MI

Zip Code

48911-2222

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 ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 7 / 2 0 0 8

Transaction ID: SA11AI.93427

Amount of Each Receipt this Period

225.00

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

759.00

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

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

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

FOR LINE NUMBER: PAGE 37 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

C G SHERWOOD

Mailing Address 3400 GLENBROOK DR

City

LANSING

State

MI

Zip Code

48911-2222

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 ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 2 4 / 2 0 0 8

Transaction ID: SA11AI.93423

Amount of Each Receipt this Period

25.00

**B.**

Full Name (Last, First, Middle Initial)

MICHAEL SMITH

Mailing Address 105 GENERALS WAY CT

City

FRANKLIN

State

TN

Zip Code

37064-4981

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SATURN

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  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93970

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

TIMOTHY G SMITH

Mailing Address 572 CHANDLERS RD

City

AUBURN

State

KY

Zip Code

42206-5322

FEC ID number of contributing  
federal political committee.

C

Name of Employer

MAHLE

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  
0 4 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.93354

Amount of Each Receipt this Period

300.00

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

350.00

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

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

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

FOR LINE NUMBER: PAGE 38 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

DONALD L SOBAS

Mailing Address 210 MERRIMAN RD

City

GARDEN CITY

State

MI

Zip Code

48135-1300

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 ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93746

Amount of Each Receipt this Period

110.00

**B.**

Full Name (Last, First, Middle Initial)

RONALD SPURLOCK

Mailing Address 103 SOUTH HAMPTON

City

OAK LEAF

State

TX

Zip Code

75154-3847

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93850

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JAMES STEWART

Mailing Address 21733 MT AETNA RD

City

HAGERSTOWN

State

MD

Zip Code

21742

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93782

Amount of Each Receipt this Period

300.00

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

710.00

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

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

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

FOR LINE NUMBER: PAGE 39 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

MARK A STONER

Mailing Address 2415 ROSS STREET

City

NORTHWOOD

State

OH

Zip Code

43619-1417

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 ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93394

Amount of Each Receipt this Period

20.00

**B.**

Full Name (Last, First, Middle Initial)

MARK A STONER

Mailing Address 2415 ROSS STREET

City

NORTHWOOD

State

OH

Zip Code

43619-1417

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  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93841

Amount of Each Receipt this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

JIMMY STOUFER SR

Mailing Address 315 E LONGFELLOW ST

City

KANSAS CITY

State

MO

Zip Code

64119-1728

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 ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93891

Amount of Each Receipt this Period

100.00

**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)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 118

(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)

CHRISTOPHERJ SZABO

Mailing Address 4523 NEWBERRY ST

City

WAYNE

State

MI

Zip Code

48184-2171

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 ▼

1400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93904

Amount of Each Receipt this Period

400.00

**B.**

Full Name (Last, First, Middle Initial)

MELVIN N THOMPSON JR

Mailing Address 5722 PERRYTOWN DR

City

WEST BLOOMFIELD

State

MI

Zip Code

48322

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.93926

Amount of Each Receipt this Period

60.00

**C.**

Full Name (Last, First, Middle Initial)

CONNIE THURMAN

Mailing Address 956 TEXARKANA DRIVE

City

INDIANAPOLIS

State

IN

Zip Code

46231

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INTERNATION UNION, UAW

Occupation

CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 1 / 2 0 0 8

Transaction ID: SA11AI.93795

Amount of Each Receipt this Period

300.00

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

760.00

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



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

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

FOR LINE NUMBER: PAGE 41 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

CLARENCE L TOWNS

Mailing Address 4569 CREEK FORD DR

City

DULUTH

State

GA

Zip Code

30096-7204

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93953

Amount of Each Receipt this Period

9.00

**B.**

Full Name (Last, First, Middle Initial)

BRENDA UPCHURCH

Mailing Address 4040 N 267

City

BROWNSBURG

State

IN

Zip Code

46112-9708

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 1 9 / 2 0 0 8

Transaction ID: SA11AI.93751

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH A VEEHOFF

Mailing Address 102 1ST AVENUE

City

HAWTHORNE

State

NJ

Zip Code

07506-2406

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.94011

Amount of Each Receipt this Period

260.00

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

569.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

ELLEN N WALLACE

Mailing Address 18 BOND ST.

City

SOMERVILLE

State

MA

Zip Code

02145-1507

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.93859

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

MARIETTA WHALEN

Mailing Address 309 W 24TH ST

City

WILMINGTON

State

DE

Zip Code

19802-4135

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 ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Transaction ID: SA11AI.93853

Amount of Each Receipt this Period

5.00

**C.**

Full Name (Last, First, Middle Initial)

COLLEEN WILLIAMSON

Mailing Address 50 HOLIDAY LANE

City

MOORESVILLE

State

IN

Zip Code

46158

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STATE OF INDIANA

Occupation

CLERICAL

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 1 5 / 2 0 0 8

Transaction ID: SA11AI.93350

Amount of Each Receipt this Period

300.00

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

555.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 118

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

KENNETH WORLEY

Mailing Address 10337 AIKINSVILLE RD.

City

FORTUNA

State

MO

Zip Code

65034

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  
0 5 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.93855

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

ROBERT T YEAGER

Mailing Address 1146 SOUTHEAST AVE

City

OAK PARK

State

IL

Zip Code

60304

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEGAL SERVICES FOR NEW YO-  
RK

Occupation

CLERK

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Transaction ID: SA11AI.93803

Amount of Each Receipt this Period

260.00

**C.**

Full Name (Last, First, Middle Initial)

T M ZARLINGA

Mailing Address 7547 ZONA LN

City

PARMA

State

OH

Zip Code

44130-5808

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 ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 2 7 / 2 0 0 8

Transaction ID: SA11AI.93776

Amount of Each Receipt this Period

300.00

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

860.00

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

24370.80

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

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

FOR LINE NUMBER: PAGE 44 / 118

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)  
DEMOCRATIC PARTY OF WISCONSIN

Mailing Address 222 STATE STREET, SUITE 400

City State Zip Code  
MADISON WI 53703

FEC ID number of contributing  
federal political committee.

**C** C00019331

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: SA16.94034

Amount of Each Receipt this Period

1000.00

REFUND OF CONTRIBUTION

**B.**

Full Name (Last, First, Middle Initial)  
UDALL FOR US ALL

Mailing Address P O BOX 208

City State Zip Code  
SANTA FE NM 87504

FEC ID number of contributing  
federal political committee.

**C** C00329896

Name of Employer

Occupation

Receipt For:

☒ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 6 / 1 2 / 2 0 0 8

Transaction ID: SA16.94273

Amount of Each Receipt this Period

1000.00

REFUND OF CONTRIBUTION

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

2000.00

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

2000.00

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

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

FOR LINE NUMBER: PAGE 45 / 118

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

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 ▼

9575.11

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA17.93447

Amount of Each Receipt this Period

1815.77

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 ▼

9817.56

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA17.93448

Amount of Each Receipt this Period

242.45

INTEREST ON CHECKING

**C.**

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 ▼

9947.84

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA17.93449

Amount of Each Receipt this Period

130.28

INTEREST ON CHECKING

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

2188.50

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

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

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

FOR LINE NUMBER: PAGE 46 / 118

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

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 ▼

9964.99

Date of Receipt

M M / D D / Y Y Y Y Y  
0 4 / 3 0 / 2 0 0 8

Transaction ID: SA17.93450

Amount of Each Receipt this Period

17.15

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 ▼

11785.98

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: SA17.94030

Amount of Each Receipt this Period

1820.99

INTEREST ON CHECKING

**C.**

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 ▼

11803.13

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: SA17.94031

Amount of Each Receipt this Period

17.15

INTEREST ON CHECKING

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

1855.29

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

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

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

FOR LINE NUMBER: PAGE 47 / 118

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

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 ▼

12059.09

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: SA17.94032

Amount of Each Receipt this Period

255.96

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 ▼

12195.24

Date of Receipt

M M / D D / Y Y Y Y Y  
0 5 / 3 1 / 2 0 0 8

Transaction ID: SA17.94033

Amount of Each Receipt this Period

136.15

INTEREST ON CHECKING

**C.**

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 ▼

14102.62

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA17.94289

Amount of Each Receipt this Period

1907.38

INTEREST ON CHECKING

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

2299.49

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

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

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

FOR LINE NUMBER: PAGE 48 / 118

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

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 ▼

14120.35

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA17.94290

Amount of Each Receipt this Period

17.73

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 ▼

14386.68

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA17.94291

Amount of Each Receipt this Period

266.33

INTEREST ON CHECKING

**C.**

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 ▼

14521.43

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 3 0 / 2 0 0 8

Transaction ID: SA17.94292

Amount of Each Receipt this Period

134.75

INTEREST ON CHECKING

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

418.81

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

6762.09



# **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 49 / 118

<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

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

NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN IMAGES BY HILLSTAR

Mailing Address 25 IMSON STREET

City  
BUFFALO

State  
NY

Zip Code  
14210

Purpose of Disbursement  
R9 #L15605 DIAMOND CLUB JACKET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93282

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4326.18

**B.**

Full Name (Last, First, Middle Initial)

AMERICAN IMAGES BY HILLSTAR

Mailing Address 25 IMSON STREET

City  
BUFFALO

State  
NY

Zip Code  
14210

Purpose of Disbursement  
R9 #L15698 DIAMOND CLUB JACKET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93284

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2339.07

**C.**

Full Name (Last, First, Middle Initial)

AMERICAN IMAGES BY HILLSTAR

Mailing Address 25 IMSON STREET

City  
BUFFALO

State  
NY

Zip Code  
14210

Purpose of Disbursement  
R9 INV#L15940-DIAMOND JACKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93472

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1809.56

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

8474.81

**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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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

AMERICAN TIME MANUFACTURING, LTD.

Mailing Address 1600 NORTH CLINTON AVE.

City State Zip Code  
 ROCHESTER NY 14621

Purpose of Disbursement  
 R2B #0010298-PLAT CLUB WATCHES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93470

Date of Disbursement

/   /

Amount of Each Disbursement this Period

768.25

**B.**

Full Name (Last, First, Middle Initial)

Bank One

Mailing Address PO Box 206A

City State Zip Code  
 Detroit MI 48232

Purpose of Disbursement  
 08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

280.00

**C.**

Full Name (Last, First, Middle Initial)

Bank One

Mailing Address PO Box 206A

City State Zip Code  
 Detroit MI 48232

Purpose of Disbursement  
 08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93677

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

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

1748.25

**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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bank One	<b>Transaction ID:</b> SB21B.94074 <b>Date of Disbursement</b>
Mailing Address PO Box 206A	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Detroit MI 48232	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement FED TX WD/B HOWARD/945 2ND QTR	<div> <div></div> <div>1680.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) CLYDE HARDY	<b>Transaction ID:</b> SB21B.93477 <b>Date of Disbursement</b>
Mailing Address 204 WESTERN AVENUE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 9 / 2 0 0 8</div> </div>
City State Zip Code TOLEDO OH 43609	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement 08 REG 2B VCAP PRIZE WINNERS	<div> <div></div> <div>2500.00</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) CUSTOM PROMOTIONS, INC.	<b>Transaction ID:</b> SB21B.93451 <b>Date of Disbursement</b>
Mailing Address 17520 W. TWELVE MILE RD. #210	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code SOUTHFIELD MI 48076	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement R1A INV#144692 VCAP JACKETS	<div> <div></div> <div>63146.85</div> </div>
Candidate Name	<div> <div></div> <div>Category/ Type</div> </div>
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) .....

**67326.85**

**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 PageFOR 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)

A.

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1A INV#144693-VCAP JACKETS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93457

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 7 / 2 0 0 8

Amount of Each Disbursement this Period

58486.37

B.

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1A INV#144507-VCAP LUNCH BAGS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93461

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 0 8 / 2 0 0 8

Amount of Each Disbursement this Period

6063.68

C.

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1A INV#144808 VCAP LUNCH BAGS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93469

Date of Disbursement

M M / D D / Y Y Y Y  
0 5 / 2 2 / 2 0 0 8

Amount of Each Disbursement this Period

7606.66

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

72156.71

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)

**A.**

Full Name (Last, First, Middle Initial)  
CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.  
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement  
R1A INV #144823 WATER BOTTLES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

497.58

**B.**

Full Name (Last, First, Middle Initial)  
DAN RODGERS SPORTING GOODS

Mailing Address 5340 MONROE STREET

City TOLEDO State OH Zip Code 43623

Purpose of Disbursement  
R2B IN#34634 PLAT CLUB JACKETS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93280

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1921.50

**C.**

Full Name (Last, First, Middle Initial)  
DAN RODGERS SPORTING GOODS

Mailing Address 5340 MONROE STREET

City TOLEDO State OH Zip Code 43623

Purpose of Disbursement  
R2B IN#00034722 VCAP PLAQUES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21B.93455

Date of Disbursement

/   /

Amount of Each Disbursement this Period

320.25

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

2739.33

**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)

**A.** Full Name (Last, First, Middle Initial)  
DAN RODGERS SPORTING GOODS

Mailing Address 5340 MONROE STREET

City TOLEDO State OH Zip Code 43623

Purpose of Disbursement  
R2B INV#34821-PLAT CLUB JACKET

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94075

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

149.45

**B.** Full Name (Last, First, Middle Initial)  
DOUGLAS HAYES

Mailing Address 3819 TR 26

City CARDINGTON State OH Zip Code 43315

Purpose of Disbursement  
08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93488

Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
FJ GRAFIK, INC.

Mailing Address 11049 CORUNNA ROAD  
P.O. BOX 209

City LENNON State MI Zip Code 48449

Purpose of Disbursement  
R1C INV#135776-PRINTING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93468

Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

1058.94

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

1708.39

**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)

**A.**

Full Name (Last, First, Middle Initial)

GENERAL MOTIVATION COMPANY

Mailing Address 3085 WALKENT DR. NW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49544-1440

Purpose of Disbursement  
R1D INV#49578 V-CAP PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93291

Date of Disbursement

/   /

Amount of Each Disbursement this Period

12520.51

**B.**

Full Name (Last, First, Middle Initial)

BRENDA HOWARD

Mailing Address 8749 RUSHSIDE DRIVE

City  
PINKNEY

State  
MI

Zip Code  
48169

Purpose of Disbursement  
WINNER OF 2007 VCAP 1ST PLACE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94072

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6000.00

**C.**

Full Name (Last, First, Middle Initial)

IMAGE GROUP

Mailing Address 1255 CORPORATE DR.  
PO BOX 1147

City  
HOLLAND

State  
OH

Zip Code  
43528-1147

Purpose of Disbursement  
R2B #1004622-PLAT CLUB AWARDS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

9203.99

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

27724.50

**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)

A.

Full Name (Last, First, Middle Initial)

JEREMY PROBERT

Mailing Address 3766 FAIRWOOD

City  
SYLVANIA

State  
OH

Zip Code  
43560

Purpose of Disbursement  
08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93283

Date of Disbursement

/   /

Amount of Each Disbursement this Period

277.47

C.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93287

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.00

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

837.47

**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  
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(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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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 JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93289

Date of Disbursement

/   /

Amount of Each Disbursement this Period

321.20

B.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93454

Date of Disbursement

/   /

Amount of Each Disbursement this Period

233.15

C.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93460

Date of Disbursement

/   /

Amount of Each Disbursement this Period

346.26

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

900.61

**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)

A.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93462

Date of Disbursement

05 / 15 / 2008

Amount of Each Disbursement this Period

68.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93464

Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

56.50

C.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93465

Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

110.50

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

235.00

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  
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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)

A.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93466

Date of Disbursement

05 / 22 / 2008

Amount of Each Disbursement this Period

60.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93474

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

47.60

C.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City  
OAK PARK

State  
MI

Zip Code  
48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93475

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

61.00

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

168.60

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 60 / 118

<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)

A.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code  
OAK PARK MI 48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.94077

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

269.94

B.

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code  
OAK PARK MI 48237

Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.94082

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

198.78

C.

Full Name (Last, First, Middle Initial)

JUDY MOORE

Mailing Address 1230 BEAL ROAD

City State Zip Code  
MANSFIELD OH 44903

Purpose of Disbursement  
08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB21B.93480

Date of Disbursement

05 / 29 / 2008

Amount of Each Disbursement this Period

1000.00

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

1468.72

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 61 / 118

<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)

**A.**

Full Name (Last, First, Middle Initial)

LEIGH KEGERREIS

Mailing Address 13704 LAPLAISANCE RD.

City  
MONROEState  
MIZip Code  
48161Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93285

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

60.00									
-------	--	--	--	--	--	--	--	--	--

**B.**

Full Name (Last, First, Middle Initial)

LEIGH KEGERREIS

Mailing Address 13704 LAPLAISANCE RD.

City  
MONROEState  
MIZip Code  
48161Purpose of Disbursement  
LEASED EMPLOYEE COSTS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93459

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	8

Amount of Each Disbursement this Period

60.00									
-------	--	--	--	--	--	--	--	--	--

**C.**

Full Name (Last, First, Middle Initial)

MARK MOHN

Mailing Address 5371 PLEASANT ST.

City  
NORTH RIDGEVILLEState  
OHZip Code  
44039Purpose of Disbursement  
08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93482

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	9		2	0	0	8

Amount of Each Disbursement this Period

500.00									
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SUBTOTAL of Disbursements This Page (optional) .....

620.00

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 62 / 118

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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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 LIBBEE

Mailing Address 3966 STATE RT. 601

City  
NORWALK

State  
OH

Zip Code  
44857

Purpose of Disbursement  
08 REG 2B VCAP PRIZE WINNERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93486

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

SHANE SACK

Mailing Address 6110 GRAND BLANC RD

City  
SWARTZ CREEK

State  
MI

Zip Code  
48473-9442

Purpose of Disbursement  
R1C INS-RAFFLE AUTO#AIG6799096

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94081

Date of Disbursement

/   /

Amount of Each Disbursement this Period

478.58

C.

Full Name (Last, First, Middle Initial)

SWIFT PRINTING COMPANY

Mailing Address 404 BRIDGE STREET NW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49504

Purpose of Disbursement  
R1D INV#34147-DIR CLUB BOOKS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93290

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2404.08

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

3382.66

**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 63 / 118

<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)

**A.**

Full Name (Last, First, Middle Initial)

THE MCLAUGHLIN COMPANY

Mailing Address 1725 DESALES ST. NW

City  
WASHINGTON

State  
DC

Zip Code  
20036

Purpose of Disbursement  
CAP COUNCIL COMMERCIAL INSURANCE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94078

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
06 / 17 / 2008

Amount of Each Disbursement this Period

94.00

**B.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 644

Mailing Address 1200 EAST HIGH STREET

City  
POTTSTOWN

State  
PA

Zip Code  
19464-4954

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93281

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
04 / 14 / 2008

Amount of Each Disbursement this Period

4412.96

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 644

Mailing Address 1200 EAST HIGH STREET

City  
POTTSTOWN

State  
PA

Zip Code  
19464-4954

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93452

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
05 / 05 / 2008

Amount of Each Disbursement this Period

6491.20

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

10998.16

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 64 / 118

<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)

**A.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 644

Mailing Address 1200 EAST HIGH STREET

City  
POTTSTOWNState  
PAZip Code  
19464-4954Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93453

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	5	/	2	0	0	8

Amount of Each Disbursement this Period

3235.50

**B.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 644

Mailing Address 1200 EAST HIGH STREET

City  
POTTSTOWNState  
PAZip Code  
19464-4954Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94080

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	2	0	/	2	0	0	8

Amount of Each Disbursement this Period

4840.24

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROEState  
MIZip Code  
48161Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93286

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	6	/	2	0	0	8

Amount of Each Disbursement this Period

1141.15

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

9216.89

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 65 / 118

<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)

**A.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93292

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1284.15

**B.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93293

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1362.14

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.93456

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1423.59

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

4069.88

**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 66 / 118

<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)

<b>A.</b> Full Name (Last, First, Middle Initial) UAW LOCAL 723	<b>Transaction ID:</b> SB21B.93458 <b>Date of Disbursement</b>																				
Mailing Address 281 DETROIT	<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>0</td><td>5</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	8		2	0	0	8												
City MONROE State MI Zip Code 48161	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAYMENT LEASED RESTRICTED CLASS EMPLOYEE	<table border="1"> <tr> <td>3</td><td>4</td><td>2</td><td>3</td><td>.</td><td>4</td><td>5</td> </tr> </table>	3	4	2	3	.	4	5													
3	4	2	3	.	4	5															
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) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) UAW LOCAL 723	<b>Transaction ID:</b> SB21B.93463 <b>Date of Disbursement</b>																				
Mailing Address 281 DETROIT	<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>0</td><td>5</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	5		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	5		2	0	0	8												
City MONROE State MI Zip Code 48161	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAYMENT LEASED RESTRICTED CLASS EMPLOYEE	<table border="1"> <tr> <td>1</td><td>3</td><td>3</td><td>9</td><td>.</td><td>1</td><td>3</td> </tr> </table>	1	3	3	9	.	1	3													
1	3	3	9	.	1	3															
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) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) UAW LOCAL 723	<b>Transaction ID:</b> SB21B.93473 <b>Date of Disbursement</b>																				
Mailing Address 281 DETROIT	<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>0</td><td>5</td><td></td><td>2</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		2	8		2	0	0	8
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		2	8		2	0	0	8												
City MONROE State MI Zip Code 48161	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement PAYMENT LEASED RESTRICTED CLASS EMPLOYEE	<table border="1"> <tr> <td>8</td><td>9</td><td>8</td><td>.</td><td>6</td><td>5</td> </tr> </table>	8	9	8	.	6	5														
8	9	8	.	6	5																
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) .....

**5661.23**

**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)

**A.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.94076

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1359.03

**B.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.94083

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1283.42

**C.**

Full Name (Last, First, Middle Initial)

UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
PAYMENT LEASED RESTRICTED CLASS EMPLOYEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB21B.94084

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1258.14

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

3900.59

**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)

**A.**

Full Name (Last, First, Middle Initial)

VIZUAL EXPRESS

Mailing Address 440 E. CENTER STREET

City  
MARION

State  
OH

Zip Code  
43302

Purpose of Disbursement  
R2B INV#9257 VCAP RINGS (100)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.94079

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6477.00

**B.**

Full Name (Last, First, Middle Initial)

WILSON TROPHY COMPANY

Mailing Address 1724 FRIENZA AVE.

City  
SACRAMENTO

State  
CA

Zip Code  
95815

Purpose of Disbursement  
R1D INV #A06-1683 VICTORY PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93294

Date of Disbursement

/   /

Amount of Each Disbursement this Period

28.18

**C.**

Full Name (Last, First, Middle Initial)

WILSON TROPHY COMPANY

Mailing Address 1724 FRIENZA AVE.

City  
SACRAMENTO

State  
CA

Zip Code  
95815

Purpose of Disbursement  
INV #A06-1773 R5 V-CAP PINS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.93295

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4307.19

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

10812.37

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

234151.02

# **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 checked="" 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)

**A.**

Full Name (Last, First, Middle Initial)

OHIO STATE UAW PAC COUNCIL

Mailing Address 133 E. LIVINGSTON ROAD

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.94085

Date of Disbursement

MM / DD / YYYY  
06 / 13 / 2008

Amount of Each Disbursement this Period

250000.00

**B.**

Full Name (Last, First, Middle Initial)

UAW MICHIGAN V-PAC

Mailing Address 8000 E. JEFFERSON

City DETROIT State MI Zip Code 48214

Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB22.94086

Date of Disbursement

MM / DD / YYYY  
06 / 20 / 2008

Amount of Each Disbursement this Period

250000.00

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

500000.00

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

500000.00

# **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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

AMERICA'S LEADERSHIP PAC

Mailing Address 198-1/2 F STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93304

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 4 / 2 8 / 2 0 0 8

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

AMERIPAC

Mailing Address 1341 G STREET NW SUITE 200

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93688

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 5 / 2 8 / 2 0 0 8

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

ANDRE' CARSON FOR CONGRESS

Mailing Address ONE N. CAPITOL AVE. #200

City  
INDIANAPOLIS

State  
IN

Zip Code  
46204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ANDRE CARSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 07

Transaction ID: SB23.94103

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 6 / 1 1 / 2 0 0 8

Amount of Each Disbursement this Period

5000.00

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

12500.00

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 PageFOR 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)

**A.**

Full Name (Last, First, Middle Initial)

ANNE BARTH FOR CONGRESS

Mailing Address PO BOX 2151

City  
CHARLESTONState  
WVZip Code  
25328Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ANNE BARTHCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 02

Transaction ID: SB23.93347

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Amount of Each Disbursement this Period

2500.00

**B.**

Full Name (Last, First, Middle Initial)

ARCURI FOR CONGRESS

Mailing Address PO BOX 8508

City  
UTICAState  
NYZip Code  
13505Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MICHAEL A ARCURICategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 24

Transaction ID: SB23.94128

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

BEN CARDIN FOR SENATE

Mailing Address PO BOX 65056

City  
BALTIMOREState  
MDZip Code  
21209Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
BENJAMIN L CARDINCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2012  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 03

Transaction ID: SB23.93321

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

4500.00

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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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BERRY FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.94087 <b>Date of Disbursement</b>
Mailing Address 227 MASSACHUSETTS AVE., N.E., SUITE 101	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div>
City WASHINGTON State DC Zip Code 20002	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTOR	<div>1000.00</div>
Candidate Name MARION BERRY	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>BETTY MCCOLLUM FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.94119 <b>Date of Disbursement</b>
Mailing Address PO BOX 14131	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 6 / 2 0 0 8</div> </div>
City ST PAUL State MN Zip Code 55114-0131	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name BETTY MCCOLLUM	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>BILL FOSTER FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.94099 <b>Date of Disbursement</b>
Mailing Address PO BOX 703	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 1 / 2 0 0 8</div> </div>
City GENEVA State IL Zip Code 60134	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>5000.00</div>
Candidate Name G. WILLIAM (BIL FOSTER)	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**7000.00**

**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  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

BISHOP FOR CONGRESS

Mailing Address 6 E STREET S.E.

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
TIMOTHY BISHOP

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 01

**Transaction ID:** SB23.93339

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**B.**

Full Name (Last, First, Middle Initial)

BOB BRADY FOR CONGRESS

Mailing Address P O BOX 22471

City  
PHILADELPHIA

State  
PA

Zip Code  
19110-2471

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROBERT A BRADY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 01

**Transaction ID:** SB23.94131

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

BOB LORD FOR CONGRESS

Mailing Address 4340 E. INDIAN SCHOOL ROAD  
 SUITE 21-502

City  
PHOENIX

State  
AZ

Zip Code  
85018

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROBERT JAMES LORD

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 03

**Transaction ID:** SB23.94089

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

9000.00

**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  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

BORN FIGHTING PAC

Mailing Address 426 C STREET, NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.93309

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

BRIGHT FOR CONGRESS

Mailing Address PO BOX 2106

City  
MONTGOMERY

State  
AL

Zip Code  
36102

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
BOBBY NEAL SR BRIGHT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 02

**Transaction ID:** SB23.93681

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

BUTTERFIELD FOR CONGRESS COMMITTEE

Mailing Address 800 W. HINES STREET

City  
WILSON

State  
NC

Zip Code  
27893

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
G K BUTTERFIELD

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 01

**Transaction ID:** SB23.94123

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

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

Use separate schedule(s)  
for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>BYRNE FOR CONGRESS</b> Mailing Address PO BOX 2612	<b>Transaction ID:</b> SB23.93725 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div>
City FALLS CHURCH State VA Zip Code 22042 Purpose of Disbursement CONTRIBUTION Candidate Name LESLIE L BYRNE Office Sought: <input checked="" type="checkbox"/> House <input 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: VA District: 11	<b>Amount of Each Disbursement this Period</b> <div>2500.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) <b>CAMPAIGN TO ELECT JIM MARSHALL</b> Mailing Address PO BOX 125 City MACON State GA Zip Code 31202 Purpose of Disbursement CONTRIBUTION Candidate Name JIM MARSHALL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 08	<b>Transaction ID:</b> SB23.93312 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 1 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) <b>CAMPAIGN TO ELECT JIM MARSHALL</b> Mailing Address PO BOX 125 City MACON State GA Zip Code 31202 Purpose of Disbursement CONTRIBUTION Candidate Name JIM MARSHALL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: GA District: 08	<b>Transaction ID:</b> SB23.93693 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1000.00</div>

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

**4500.00**

**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:  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

CARNEY FOR CONGRESS

Mailing Address PO BOX A

City  
CLARKS SUMMIT

State  
PA

Zip Code  
18411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHRISTOPHER CARNEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: SB23.93342

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

CARNEY FOR CONGRESS

Mailing Address PO BOX A

City  
CLARKS SUMMIT

State  
PA

Zip Code  
18411

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHRISTOPHER CARNEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: SB23.94132

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

CAROL SHEA-PORTER FOR CONGRESS

Mailing Address PO BOX 453

City  
ROCHESTER

State  
NH

Zip Code  
03866

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CAROL SHEA-PORTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: SB23.93329

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

4000.00

**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)

**A.** Full Name (Last, First, Middle Initial)  
CAROL SHEA-PORTER FOR CONGRESS

Mailing Address PO BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CAROL SHEA-PORTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NH District: 01

Transaction ID: SB23.94126

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
CAZAYOUX FOR CONGRESS

Mailing Address PO BOX 156

City NEW ROADS State LA Zip Code 70760

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DONALD J CAZAYOUX

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: LA District: 06

Transaction ID: SB23.93318

Date of Disbursement

04 / 14 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CENTER FOR AMERICAN PROGRESS

Mailing Address 1333 H STREET, N.W.  
TENTH FLOOR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93686

Date of Disbursement

05 / 05 / 2008

Amount of Each Disbursement this Period

5000.00

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

7000.00

**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  
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(check only one)

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NAME OF COMMITTEE (In Full)

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

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

Mailing Address PO BOX 12678

City LEXINGTON State KY Zip Code 40583

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
A.B. III CHANDLER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY District: 06

Transaction ID: SB23.93697

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
CHET EDWARDS FOR CONGRESS

Mailing Address P.O. BOX 70426

City WASHINGTON State DC Zip Code 20024

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHET EDWARDS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 17

Transaction ID: SB23.93344

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
CHILDERS FOR CONGRESS

Mailing Address 200 N. 2ND STREET

City BOONEVILLE State MS Zip Code 38829

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
TRAVIS W CHILDERS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 01

Transaction ID: SB23.93703

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

**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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
CHRISTINE JENNINGS FOR CONGRESS

Mailing Address PO BOX 49135

City SARASOTA State FL Zip Code 34230

Purpose of Disbursement

CONTRIBUTION

Candidate Name  
CHRISTINE JENNINGS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 13

Transaction ID: SB23.93692

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**B.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR CALLAHAN

Mailing Address PO BOX 9458

City PEORIA State IL Zip Code 61612

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
COLLEEN CALLAHAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 18

Transaction ID: SB23.93314

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
CITIZENS FOR ELEANOR HOLMES NORTON

Mailing Address 1730 RHODE ISLAND AVE, NW  
SUITE 712

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ELEANOR HOLMES NORTON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: DC District: 00

Transaction ID: SB23.93303

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

9000.00

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

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

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

CLARKE FOR CONGRESS

Mailing Address 11136 200TH STREET

City  
HOLLIS

State  
NY

Zip Code  
11412

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
YVETTE CLARKE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 11

**Transaction ID:** SB23.93718

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH

City  
MEMPHIS

State  
TN

Zip Code  
38112

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STEVE I MR. COHEN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 09

**Transaction ID:** SB23.93343

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

**C.**

Full Name (Last, First, Middle Initial)

COMMITTEE FOR A DEMOCRATIC MAJORITY

Mailing Address 426 C STREET, NE, REAR BLDG

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.93306

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

10000.00

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



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

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NAME OF COMMITTEE (In Full)

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

**A. COMMITTEE TO RE-ELECT CAROLYN CHEEKS**

Full Name (Last, First, Middle Initial)

COMMITTEE TO RE-ELECT CAROLYN CHEEKS

Mailing Address P.O. BOX 32175

City  
DETROIT

State  
MI

Zip Code  
48232

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CAROLYN MS. KILPATRICK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 13

Transaction ID: SB23.93700

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**B. COMMITTEE TO RE-ELECT CAROLYN CHEEKS**

Full Name (Last, First, Middle Initial)

COMMITTEE TO RE-ELECT CAROLYN CHEEKS

Mailing Address P.O. BOX 32175

City  
DETROIT

State  
MI

Zip Code  
48232

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CAROLYN MS. KILPATRICK

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 13

Transaction ID: SB23.94114

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C. COMMITTEE TO RE-ELECT CONGRESSMAN**

Full Name (Last, First, Middle Initial)

COMMITTEE TO RE-ELECT CONGRESSMAN

Mailing Address PO BOX 3184

City  
HAMILTON

State  
NJ

Zip Code  
08619

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CHRISTOPHER H. SMITH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 04

Transaction ID: SB23.93331

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

5500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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(check only one)

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<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)

A.

Full Name (Last, First, Middle Initial)

CONGRESSIONAL BLACK CAUCUS PAC

Mailing Address 1701 PENNSYLVANIA NW #960

City  
WASHINGTONState  
DCZip Code  
20006Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93305

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	2	8	/	2	0	0	8

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

CONNECTICUT DEMOCRATIC STATE

Mailing Address 179 ALLYN STREET  
SUITE 301City  
HARTFORDState  
CTZip Code  
06103Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93300

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	1	4	/	2	0	0	8

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

CONSUMER FEDERATION OF AMERICA

Mailing Address 1424 16TH STREET, NW  
SUITE 604City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93687

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	7	/	2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

CONYERS FOR CONGRESS

Mailing Address 1833 EAST JEFFERSON AVENUE

City State Zip Code  
DETROIT MI 48207

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN JR. CONYERS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 14

Transaction ID: SB23.93323

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

COSTELLO FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 8250

City State Zip Code  
BELLEVILLE IL 62222

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JERRY F COSTELLO

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 12

Transaction ID: SB23.93316

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

CUMMINGS FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ELIJAH E CUMMINGS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: SB23.93319

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

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

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ELIJAH E CUMMINGS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 07

Transaction ID: SB23.94109

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
DAN LIPINSKI FOR CONGRESS

Mailing Address 5838 S. ARCHER

City CHICAGO State IL Zip Code 60638

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DANIEL WILLIAM LIPINSKI

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 03

Transaction ID: SB23.93696

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
DAN LIPINSKI FOR CONGRESS

Mailing Address 5838 S. ARCHER

City CHICAGO State IL Zip Code 60638

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DANIEL WILLIAM LIPINSKI

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 03

Transaction ID: SB23.94100

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

DARCY BURNER FOR CONGRESS

Mailing Address PO BOX 1090

City  
CARNATION

State  
WA

Zip Code  
98014

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DARCY MS. BURNER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 08

**Transaction ID:** SB23.93346

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

**B.**

Full Name (Last, First, Middle Initial)

DARCY BURNER FOR CONGRESS

Mailing Address PO BOX 1090

City  
CARNATION

State  
WA

Zip Code  
98014

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DARCY MS. BURNER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 08

**Transaction ID:** SB23.94142

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

DAVID PRICE FOR CONGRESS

Mailing Address PO BOX 1986

City  
RALEIGH

State  
NC

Zip Code  
27602

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DAVID PRICE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 04

**Transaction ID:** SB23.94122

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

DAVIS FOR CONGRESS

Mailing Address PO BOX 2842

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DANNY K DAVIS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 07

Transaction ID: SB23.93695

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address 1725 MAIN STREET  
SUITE 215

City  
WESTON

State  
FL

Zip Code  
33326

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DEBBIE WASSERMAN SCHULTZ

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 20

Transaction ID: SB23.93310

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Mailing Address 1725 MAIN STREET  
SUITE 215

City  
WESTON

State  
FL

Zip Code  
33326

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DEBBIE WASSERMAN SCHULTZ

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 20

Transaction ID: SB23.93691

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
DEMOCRATIC PARTY OF VIRGINIA

Mailing Address 1108 EAST MAIN STREET  
2ND FLOOR

City RICHMOND State VA Zip Code 23219

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.94141

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
DOYLE FOR CONGRESS COMMITTEE

Mailing Address PO BOX 17426

City PITTSBURGH State PA Zip Code 15235

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MIKE DOYLE

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 14

Transaction ID: SB23.94130

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
DUTCH RUPPERSBERGER FOR CONGRESS

Mailing Address P.O. BOX 5675

City TIMONIUM State MD Zip Code 21094

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DUTCH RUPPERSBERGER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 02

Transaction ID: SB23.94110

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

2500.00

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

8500.00

**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 PageFOR LINE NUMBER:  
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<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)

**A.** Full Name (Last, First, Middle Initial)  
FRED JOHNSON FOR CONGRESS

Mailing Address PO BOX 2474

City HOLLAND State MI Zip Code 49422

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
FRED L III PHD JOHNSONCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 02

Transaction ID: SB23.94116

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF ANDREW CONCANNON

Mailing Address PO BOX 6958

City SAGINAW State MI Zip Code 48608

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ANDREW DONNELLY CONCANNONCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 04

Transaction ID: SB23.94118

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		2	3		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF BARBARA BOXER

Mailing Address PO BOX 641751

City LOS ANGELES State CA Zip Code 90064

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
BARBARA BOXERCategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2010  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 00

Transaction ID: SB23.93685

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

11000.00

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



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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>FRIENDS OF BENNIE THOMPSON</b>	<b>Transaction ID:</b> SB23.93704 <b>Date of Disbursement</b>
Mailing Address PO BOX 100	<div> <div>05</div> <div>22</div> <div>2008</div> </div>
City BOLTON State MS Zip Code 39041	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name BENNIE G THOMPSON	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>FRIENDS OF BYRON DORGAN</b>	<b>Transaction ID:</b> SB23.93328 <b>Date of Disbursement</b>
Mailing Address PO BOX 871	<div> <div>04</div> <div>14</div> <div>2008</div> </div>
City BISMARCK State ND Zip Code 58502-9915	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name BYRON L DORGAN	<div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: ND District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>FRIENDS OF CONGRESSMAN TIM HOLDEN</b>	<b>Transaction ID:</b> SB23.93720 <b>Date of Disbursement</b>
Mailing Address PO BOX 37	<div> <div>05</div> <div>15</div> <div>2008</div> </div>
City ST CLAIR State PA Zip Code 17970	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name T. TIMOTHY HOLDEN	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 17	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**3000.00**

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF CORRINE BROWN

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
CORRINE BROWN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 03

Transaction ID: SB23.93311

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF DAN MAFFEI

Mailing Address PO BOX 74

City SYRACUSE State NY Zip Code 13214

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
DANIEL B MR. MAFFEI

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 25

Transaction ID: SB23.93716

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF GEORGE MILLER

Mailing Address 300 NORTH LEE ST SUITE 500

City ALEXANDRIA State VA Zip Code 22314

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GEORGE MILLER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 07

Transaction ID: SB23.94090

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JOHN BARROW

Mailing Address 2141 WEST BROAD STREET  
SUITE B

City ATHENS State GA Zip Code 30606

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN J BARROW

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 12

Transaction ID: SB23.94096

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF MAURICE HINCHEY

Mailing Address 503 CAPITOL COURT NE  
SUITE 100

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MAURICE D HINCHEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 22

Transaction ID: SB23.93719

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF PATRICK KENNEDY

Mailing Address PO BOX 77047

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PATRICK J KENNEDY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 01

Transaction ID: SB23.93722

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF RAHM EMANUEL

Mailing Address PO BOX 101124

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RAHM EMANUEL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 05

Transaction ID: SB23.94098

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF ROSA DELAURO

Mailing Address 729 15TH STREET, NW - 3RD FLR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROSA DELAURO

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.94093

Date of Disbursement

06 / 06 / 2008

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF ROSA DELAURO

Mailing Address 729 15TH STREET, NW - 3RD FLR

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROSA DELAURO

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 03

Transaction ID: SB23.94094

Date of Disbursement

06 / 11 / 2008

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

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

## **A.** Full Name (Last, First, Middle Initial) **FRIENDS OF SENATOR ROCKEFELLER**

Mailing Address 236 MASSACHUSETTS AVE NE  
 SUITE 310

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
 CONTRIBUTION

Candidate Name  
 JOHN DAVISON IV ROCKEFELLER

Category/  
 Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WV District: 00

**Transaction ID:** SB23.93730

Date of Disbursement

05 / 07 / 2008

Amount of Each Disbursement this Period

1000.00

## **B.** Full Name (Last, First, Middle Initial) **FRIENDS OF WEINER**

Mailing Address 442 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
 CONTRIBUTION

Candidate Name  
 ANTHONY D MR WEINER

Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 09

**Transaction ID:** SB23.93336

Date of Disbursement

04 / 16 / 2008

Amount of Each Disbursement this Period

2000.00

## **C.** Full Name (Last, First, Middle Initial) **FRIENDS OF WEINER**

Mailing Address 442 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
 CONTRIBUTION

Candidate Name  
 ANTHONY D MR WEINER

Category/  
 Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 09

**Transaction ID:** SB23.94129

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
**GENE GREEN CONGRESSIONAL CAMPAIGN**

Mailing Address PO BOX 16128

City HOUSTON State TX Zip Code 77222

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RAYMOND E. 'GENE' GREEN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 29

**Transaction ID:** SB23.93345

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
**GIFFORDS FOR CONGRESS**

Mailing Address PO BOX 27565

City TUCSON State AZ Zip Code 85726

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GABRIELLE GIFFORDS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 08

**Transaction ID:** SB23.94088

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
**GILLIBRAND FOR CONGRESS**

Mailing Address 514 WARREN STREET

City HUDSON State NY Zip Code 12534

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
KIRSTEN ELIZABETH GILLIBRAND

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 20

**Transaction ID:** SB23.93337

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

5000.00

**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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
HAGAN SENATE COMMITTEE

Mailing Address PO BOX 29103

City GREENSBORO State NC Zip Code 27429-9103

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
KAY R HAGAN

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 00

Transaction ID: SB23.94125

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
HEATH SHULER FOR CONGRESS

Mailing Address PO BOX 97

City HAZELWOOD State NC Zip Code 28738

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOSEPH H SHULER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 11

Transaction ID: SB23.94121

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
HOUSE BACKPAC

Mailing Address 1341 G STREET NW #700

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93690

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

8500.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
HOYER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
Voided contribution ck#28785 dtd 1/16/08

Candidate Name  
STENY HAMILTON HOYER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: SB23.94275

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-1000.00

**B.** Full Name (Last, First, Middle Initial)  
HOYER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STENY HAMILTON HOYER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 05

Transaction ID: SB23.93322

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
JESSE JACKSON, JR FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JESSE L JR JACKSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 02

Transaction ID: SB23.94102

Date of Disbursement

/   /

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) .....



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**A.**Full Name (Last, First, Middle Initial)  
JOHN ADLER FOR CONGRESS

Mailing Address PO BOX 1024

City MOUNT LAUREL State NJ Zip Code 08054-1024

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN H ADLERCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 03

Transaction ID: SB23.93709

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	2		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**B.**Full Name (Last, First, Middle Initial)  
JOHN D. DINGELL FOR CONGRESS COMMITTEE

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013-5214

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN D MR. DINGELLCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 15

Transaction ID: SB23.94113

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**C.**Full Name (Last, First, Middle Initial)  
JOHN HALL FOR CONGRESS

Mailing Address 420 MAIN STREET

City BEACON State NY Zip Code 12508

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
JOHN JOSEPH HALLCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.93338

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

7000.00

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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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

JOHN HALL FOR CONGRESS

Mailing Address 420 MAIN STREET

City  
BEACON

State  
NY

Zip Code  
12508

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN JOSEPH HALL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.93340

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

JOHN LEWIS FOR CONGRESS COMMITTEE

Mailing Address 4212 37TH ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN MR. LEWIS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 05

Transaction ID: SB23.93694

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

JOHN SPRATT FOR CONGRESS

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOHN M JR SPRATT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 05

Transaction ID: SB23.93723

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
JUDY FEDER FOR CONGRESS

Mailing Address 1514 HARDWOOD LANE

City State Zip Code  
MC LEAN VA 22101

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JUDY M FEDER

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 10

**Transaction ID:** SB23.93726

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 5 / 1 5 / 2 0 0 8

Amount of Each Disbursement this Period

1500.00

**B.** Full Name (Last, First, Middle Initial)  
KRATOVIL FOR CONGRESS

Mailing Address 222 MAIN SAIL DRIVE  
PO BOX 518

City State Zip Code  
STEVENSVILLE MD 21666

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
FRANK M JR KRATOVIL

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 01

**Transaction ID:** SB23.93699

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 5 / 1 5 / 2 0 0 8

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
KRATOVIL FOR CONGRESS

Mailing Address 222 MAIN SAIL DRIVE  
PO BOX 518

City State Zip Code  
STEVENSVILLE MD 21666

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
FRANK M JR KRATOVIL

Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
Disbursement For: 2008 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 01

**Transaction ID:** SB23.94111

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 6 / 2 0 / 2 0 0 8

Amount of Each Disbursement this Period

1500.00

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

5000.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

LANGEVIN FOR CONGRESS

Mailing Address 301 4TH ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JAMES R LANGEVIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: RI District: 02

Transaction ID: SB23.94137

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

LAROCO FOR SENATE

Mailing Address PO BOX 1187

City  
BOISE

State  
ID

Zip Code  
83701-1187

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LARRY LAROCO

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ID District: 00

Transaction ID: SB23.94097

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

LARRY KISSELL FOR CONGRESS

Mailing Address 106 EAST MAIN STREET

City  
BISCOE

State  
NC

Zip Code  
27209

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LARRY W KISSELL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 08

Transaction ID: SB23.93326

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

5000.00

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

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

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NAME OF COMMITTEE (In Full)

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

## **A.** Full Name (Last, First, Middle Initial) **LEVIN FOR CONGRESS COMMITTEE**

Mailing Address 436 NEW JERSY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
SANDER M MR LEVIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 12

Transaction ID: SB23.93701

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

## **B.** Full Name (Last, First, Middle Initial) **LINCOLN DAVIS FOR CONGRESS**

Mailing Address P.O. BOX 2002

City PALL MALL State TN Zip Code 38577

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LINCOLN EDWARD DAVIS

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 04

Transaction ID: SB23.94140

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

## **C.** Full Name (Last, First, Middle Initial) **LINDA STENDER FOR CONGRESS**

Mailing Address PO BOX 730

City SCOTCH PLAINS State NJ Zip Code 07076

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LINDA MRS. STENDER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 07

Transaction ID: SB23.93707

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

**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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

LONE STAR FUND

Mailing Address P O BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93301

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

LOUISE SLAUGHTER REELECTION COMMITTEE

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

LOUISE MCINTOSH SLAUGHTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.93335

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

LOUISE SLAUGHTER REELECTION COMMITTEE

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

LOUISE MCINTOSH SLAUGHTER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.93717

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

8000.00

**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 PageFOR 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)

**A.**

Full Name (Last, First, Middle Initial)

LUCILLE ROYBAL-ALLARD FOR CONGRESS

**Transaction ID:** SB23.93299

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	2		2	0	0	8

Mailing Address 3415 S SEPULVEDA BLVD  
SUITE 640

Amount of Each Disbursement this Period

City LOS ANGELES State CA Zip Code 90034

1000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Candidate Name  
LUCILLE ROYBAL-ALLARDOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 34

**B.**

Full Name (Last, First, Middle Initial)

LYNCH FOR CONGRESS

**Transaction ID:** SB23.94108

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	1		2	0	0	8

Mailing Address 55 G STREET

Amount of Each Disbursement this Period

City SOUTH BOSTON State MA Zip Code 02127

1000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Candidate Name  
STEPHEN F LYNCHOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 09

**C.**

Full Name (Last, First, Middle Initial)

MARK PRYOR FOR U.S. SENATE

**Transaction ID:** SB23.93684

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Mailing Address P.O. BOX 2720

Amount of Each Disbursement this Period

City LITTLE ROCK State AR Zip Code 72203

1000.00									
---------	--	--	--	--	--	--	--	--	--

Purpose of Disbursement  
CONTRIBUTION

Category/ Type
-------------------

Candidate Name  
MARK LUNSFORD PRYOROffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District: 00

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

3000.00

**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 PageFOR 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)

**A.**

Full Name (Last, First, Middle Initial)

MARTIN HEINRICH FOR CONGRESS

Mailing Address 2118 CENTRAL AVE., SE #71

City  
ALBUQUERQUEState  
NMZip Code  
87106Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MARTIN HEINRICHCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NM District: 01

Transaction ID: SB23.93713

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

MASSACHUSETTS STATE DEMOCRATIC PARTY

Mailing Address 10 GRANITE STREET

City  
QUINCYState  
MAZip Code  
02169Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93698

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	8		2	0	0	8

Amount of Each Disbursement this Period

1250.00

**C.**

Full Name (Last, First, Middle Initial)

MASSA FOR CONGRESS

Mailing Address 15 STATE STREET

City  
PITTSFORDState  
NYZip Code  
14534Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
ERIC J J MASSACategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 29

Transaction ID: SB23.93715

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	5		2	0	0	8

Amount of Each Disbursement this Period

5000.00

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

11250.00

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 PageFOR 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)

**A.**

Full Name (Last, First, Middle Initial)

MEL WATT FOR CONGRESS

Mailing Address PO BOX 36831

City  
CHARLOTTEState  
NCZip Code  
28236Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MELVIN L WATTCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 12

Transaction ID: SB23.93327

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)

MONTAGANO FOR CONGRESS

Mailing Address 123 E. LINCOLN

City  
GOSHENState  
INZip Code  
46526Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
MICHAEL ANTHONY MONTAGANOCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 03

Transaction ID: SB23.94104

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	3		2	0	0	8

Amount of Each Disbursement this Period

5000.00

**C.**

Full Name (Last, First, Middle Initial)

MUSGROVE FOR U.S. SENATE

Mailing Address PO BOX 24477

City  
JACKSONState  
MSZip Code  
39225Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
RONNIE MUSGROVECategory/  
TypeOffice Sought: ☐ House  
☒ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 00

Transaction ID: SB23.93325

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	6		2	0	0	8

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

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

## **A.** Full Name (Last, First, Middle Initial) NELS ACKERSON FOR CONGRESS

Mailing Address 49 BOONE-VILLAGE #266

City ZIONSVILLE State IN Zip Code 46077

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
NELS ACKERSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 04

Transaction ID: SB23.94106

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

## **B.** Full Name (Last, First, Middle Initial) PARKER GRIFFITH FOR CONGRESS

Mailing Address PO BOX 2916

City HUNTSVILLE State AL Zip Code 35804

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
R PARKER GRIFFITH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 05

Transaction ID: SB23.93679

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

## **C.** Full Name (Last, First, Middle Initial) PASTOR FOR ARIZONA COMMITTEE

Mailing Address PO BOX 6554

City PHOENIX State AZ Zip Code 85005-6554

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
EDWARD L PASTOR

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 04

Transaction ID: SB23.93297

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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)

**A.** Full Name (Last, First, Middle Initial)  
PATRICK MURPHY FOR CONGRESS

Mailing Address PO BOX 868

City LEVITTOWN State PA Zip Code 19058-0868

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
PATRICK J MURPHYCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 08

Transaction ID: SB23.93341

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		1	4		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
PAUL HODES FOR CONGRESS

Mailing Address 26 SOUTH MAIN STREET, #253

City CONCORD State NH Zip Code 03301

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
PAUL W HODESCategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH District: 02

Transaction ID: SB23.93705

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
PAYNE FOR CONGRESS COMMITTEE

Mailing Address PO BOX 75214

City WASHINGTON State DC Zip Code 20013-5214

Purpose of Disbursement  
CONTRIBUTIONCandidate Name  
DONALD M PAYNECategory/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 10

Transaction ID: SB23.93332

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	4		2	8		2	0	0	8

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>PENNSYLVANIANS FOR KANJORSKI</b>	<b>Transaction ID:</b> SB23.93721 <b>Date of Disbursement</b>
Mailing Address PO BOX 2884	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 2 / 2 0 0 8</div> </div>
City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>1000.00</div>
Candidate Name PAUL E KANJORSKI	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) <b>PENNSYLVANIANS FOR KANJORSKI</b>	<b>Transaction ID:</b> SB23.94136 <b>Date of Disbursement</b>
Mailing Address PO BOX 2884	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 0 / 2 0 0 8</div> </div>
City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>3000.00</div>
Candidate Name PAUL E KANJORSKI	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) <b>PERLMUTTER FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.94091 <b>Date of Disbursement</b>
Mailing Address 2545 YOUNGFIELD ST.	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 3 / 2 0 0 8</div> </div>
City GOLDEN State CO Zip Code 80401	Amount of Each Disbursement this Period
Purpose of Disbursement CONTRIBUTION	<div>4000.00</div>
Candidate Name ED PERLMUTTER	<div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**8000.00**

**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  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)  
PETERSON FOR CONGRESS

Mailing Address PO BOX 265

City State Zip Code  
DETROIT LAKES MN 56502

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
COLLIN C PETERSON

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 07

Transaction ID: SB23.94120

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.**

Full Name (Last, First, Middle Initial)  
PETER WELCH FOR CONGRESS

Mailing Address 10 G STREET NE  
SUITE 470

City State Zip Code  
WASHINGTON DC 20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
PETER WELCH

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VT District: 00

Transaction ID: SB23.93727

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)  
PROGRESSIVE CHOICES PAC

Mailing Address 101 W. GRAND #200

City State Zip Code  
CHICAGO IL 60610

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.94101

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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

Use separate schedule(s)  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
PROGRESSIVE VOTERS OF AMERICA

Mailing Address PO BOX 852

City BURLINGTON State VT Zip Code 05402

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93729

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
RAUL GRIJALVA FOR CONGRESS

Mailing Address PO BOX 1242

City TUCSON State AZ Zip Code 85702-1242

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RAUL M MR. GRIJALVA

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 07

Transaction ID: SB23.93296

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
RE-ELECT MCGOVERN COMMITTEE

Mailing Address PO BOX 60405

City WORCESTER State MA Zip Code 01606-0405

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JIM P MCGOVERN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 03

Transaction ID: SB23.94107

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

**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  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

## **A. Full Name (Last, First, Middle Initial)** **ROBERT WEXLER FOR CONGRESS COMMITTEE**

Mailing Address 2500 N. MILITARY TRAIL  
SUITE 288

City BOCA RATON State FL Zip Code 33431

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ROBERT WEXLER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 19

**Transaction ID:** SB23.94095

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

## **B. Full Name (Last, First, Middle Initial)** **RUSH HOLT FOR CONGRESS**

Mailing Address P O BOX 782

City PENNINGTON State NJ Zip Code 08534

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
RUSH D HOLT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 12

**Transaction ID:** SB23.93706

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

## **C. Full Name (Last, First, Middle Initial)** **SAM BENNETT FOR CONGRESS**

Mailing Address PO BOX 9195

City ALLENTOWN State PA Zip Code 18105-9196

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
SIOBHAN L BENNETT

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 15

**Transaction ID:** SB23.94135

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

**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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

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

Mailing Address PO BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JANICE D SCHAKOWSKY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 09

Transaction ID: SB23.93315

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

**B.** Full Name (Last, First, Middle Initial)  
SCHWARTZ FOR CONGRESS

Mailing Address PO BOX 45706

City PHILADELPHIA State PA Zip Code 19149

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
ALLYSON Y SCHWARTZ

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: SB23.94133

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**C.** Full Name (Last, First, Middle Initial)  
SCOTT EVANS FOR MAYOR 2008

Mailing Address PO BOX 33

City ATLANTIC CITY State NJ Zip Code 08404

Purpose of Disbursement  
SCOTT EVANS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93711

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

10000.00

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



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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

SEARCHLIGHT LEADERSHIP FUND

Mailing Address 2850 CONNECTICUT AVE 1ST FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB23.93307

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**B.**

Full Name (Last, First, Middle Initial)

SEGALL FOR CONGRESS

Mailing Address PO BOX 4236

City  
MONTGOMERY

State  
AL

Zip Code  
36103

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
JOSHUA STEVEN SEGALL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

State: AL District: 03

**Transaction ID:** SB23.93683

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

**C.**

Full Name (Last, First, Middle Initial)

STEVE ISRAEL FOR CONGRESS

Mailing Address 1966 DEER PARK AVE

City  
DEER PARK

State  
NY

Zip Code  
11729

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STEVE J ISRAEL

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For:

☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 02

**Transaction ID:** SB23.93714

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

8000.00

**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 114 / 118

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
STEVE ROTHMAN FOR CONGRESS INC.

Mailing Address 38 IVY STREET, S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
STEVEN R ROTHMAN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 09

Transaction ID: SB23.94127

Date of Disbursement

06 / 13 / 2008

Amount of Each Disbursement this Period

1000.00

**B.** Full Name (Last, First, Middle Initial)  
TAMMY BALDWIN FOR CONGRESS

Mailing Address P O BOX 696

City MADISON State WI Zip Code 53701

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
TAMMY BALDWIN

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 02

Transaction ID: SB23.94143

Date of Disbursement

06 / 17 / 2008

Amount of Each Disbursement this Period

2000.00

**C.** Full Name (Last, First, Middle Initial)  
THE PEOPLE'S HOUSE PAC

Mailing Address PO BOX 685

City MADISON State WI Zip Code 53701-0685

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.94145

Date of Disbursement

06 / 20 / 2008

Amount of Each Disbursement this Period

5000.00

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

8000.00

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

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

06 / 13 / 2008

State: RI District: 00

05 / 22 / 2008

State: SD District: 00

State: SD District: 00

FEC Schedule B ( Form 3X) (Revised 02/2003)

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

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

TRAUNER FOR CONGRESS

Mailing Address PO BOX 1154

City  
WILSON

State  
WY

Zip Code  
83014

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
GARY S TRAUNER

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WY District: 01

Transaction ID: SB23.94146

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

UAW NORTH CAROLINA V-PAC

Mailing Address 1005 NORTH POINT BOULEVARD  
SUITE 701

City  
BALTIMORE

State  
MD

Zip Code  
21224

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93320

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

C.

Full Name (Last, First, Middle Initial)

UDALL FOR COLORADO

Mailing Address 8690 WOLF COURT, #200

City  
WESTMINSTER

State  
CO

Zip Code  
80031

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
MARK E UDALL

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 00

Transaction ID: SB23.94092

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

14000.00

**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:  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)

UNITE OUR STATES PAC

Mailing Address 513 CAPITOL COURT E #100

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.93302

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

VICTORY NOW PAC

Mailing Address 10605 CONCORD STREET  
SUITE 202

City  
KENSINGTON

State  
MD

Zip Code  
20895

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.94112

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

WOOLSEY FOR CONGRESS COMMITTEE

Mailing Address PO BOX 750176

City  
PETALUMA

State  
CA

Zip Code  
94975

Purpose of Disbursement  
CONTRIBUTION

Candidate Name  
LYNN C WOOLSEY

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 06

Transaction ID: SB23.93298

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

320750.00

# **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)

**A.**

Full Name (Last, First, Middle Initial)

NJ UAW CAP COUNCIL

Mailing Address 56 VINEYARD ROAD

City  
EDISON

State  
NJ

Zip Code  
08817

Purpose of Disbursement  
REPLENISHMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.94147

Date of Disbursement

/   /

Amount of Each Disbursement this Period

20000.00

**B.**

Full Name (Last, First, Middle Initial)

UAW REGION 3 VICTORY FUND

Mailing Address 5850 FORTUNE CIRCLE WEST

City  
INDIANAPOLIS

State  
IN

Zip Code  
46241

Purpose of Disbursement  
REPLENISHMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB29.93348

Date of Disbursement

/   /

Amount of Each Disbursement this Period

200000.00

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

220000.00

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

220000.00