

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

OPERATIONS CENTER
2004 OCT 25 A 10:36
Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines.

12884MS

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

000114314 091004 H 202
RON LAWRENCE
NATIONAL ASSOCIATION OF LETTER
CARRIERS OF UNITED STATES OF
11581 ILEX ST NW
CROSS RAPIDS MN 55449

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

000114314

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 Year-End Report (YE)
 July 31 540-Year Report (Non-election Year Only) (NY)
 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)
 Commission (12C) Special (12S)

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 10/01/2004 through 10/18/2004

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 Ron LAWRENCE

Signature of Treasurer *Ron Lawrence* Date 10/19/2004

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Name or Type Committee Name

PAL 9 NALC

Report Covering the Period:

From:

10 01 2009

To:

10 18 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2009		7529.27
(b) Cash on Hand at Beginning of Reporting Period	1170590	
(c) Total Receipts (from Line 19)		1017663
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1170590	1970590
7. Total Disbursements (from Line 31)	180000	980000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	990590	990590
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

This committee has qualified as a multicandidate committee. (see FEC FORM 114)

For further information contact:

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

Toll Free 800-424-9530
Local 202-684-1100

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

PAL 9 NALC

Report Covering the Period: From:

10/01/2004

To:

10/18/2004

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees (i) Reported (use Schedule A)..... (ii) Unreported..... (iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶		1017663
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(i), (ii), and (c)) (Carry Totals to Line 33, page 5).....▶		1017663
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H).....		
(b) Levin Funds (from Schedule H).....		
(c) Total Transfers (add 18(a) and 18(b)).....		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶		1017663
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶		1017663

**DETAILED SUMMARY PAGE
of Disbursements**

FSC Form 3X (Rev. 07/2009)

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Organizations		400000
24. Independent Expenditures (see Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (see Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements	180000	400000
30. Federal Election Activity (2 U.S.C. §431(2D))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		800000
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	180000	800000
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	180000	800000

DETAILED SUMMARY PAGE
of Disbursements

FED Form 3X (Rev. 03/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total Title Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Rebonds (from Line 28(d))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
	<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"/> 17

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

NAME OF COMMITTEE (in Full) **PAL9NALC**

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

Residing Address

City State Zip Code

FEC ID number of contributing federal political committee

Name of Employer Occupation

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date \$

Class of Receipt

Amount of Each Receipt this Period

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

Residing Address

City State Zip Code

FEC ID number of contributing federal political committee

Name of Employer Occupation

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date \$

Date of Receipt

Amount of Each Receipt this Period

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

Residing Address

City State Zip Code

FEC ID number of contributing federal political committee

Name of Employer Occupation

Receipt For: Primary General Other (specify) _____

Aggregate Year-to-Date \$

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)

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		POST PAGE NUMBER: (check only one)				PAGE / OF 1	
<input type="checkbox"/> 21	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input checked="" type="checkbox"/> 25	<input type="checkbox"/> 26		
	28a	28b	28c	29	30a		

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NAME OF COMMITTEE (in Full) **PAL9 NALC**

A. Citizens to Re-elect Judge LA June Lange

Full Name (Last, First, Middle Initial) **Citizens to Re-elect Judge LA June Lange**

Mailing Address **431 S. 7th Street**

City **MPLS** State **MIN** Zip Code **55415**

Purpose of Disbursement

Candidate Name **Judge LA June Lange**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District: _____

Date of Disbursement **10/13/2004**

Amount of Each Disbursement this Period **1,000.00**

B. Friends of Randy Johnson!

Full Name (Last, First, Middle Initial) **Friends of Randy Johnson!**

Mailing Address **P.O. Box 15747**

City **MPLS** State **MIN** Zip Code **55415**

Purpose of Disbursement

Candidate Name **Randy Johnson!**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: District: _____

Date of Disbursement **10/13/2004**

Amount of Each Disbursement this Period **500.00**

C. Jim Huhtala Vol. Committee

Full Name (Last, First, Middle Initial) **Jim Huhtala Vol. Committee**

Mailing Address **3989 - 116th Street**

City **Clear Lake** State **MIN** Zip Code **55330**

Purpose of Disbursement

Candidate Name **Jim Huhtala**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: **M** District: **16B**

Date of Disbursement **10/13/2004**

Amount of Each Disbursement this Period **300.00**

SUBTOTAL of Disbursements This Page (optional) **1,800.00**

TOTAL This Period (last page this line number only) **1,800.00**

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

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

<input type="checkbox"/> Hand Delivered	Date of Receipt
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<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input checked="" type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Sei
 PREPARER

(5/2004)

10-25-04
 DATE PREPARED