

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

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

12FE4M5

Service Employees International Union PEA - Federal

ADDRESS (number and street)

1800 Massachusetts Ave NW

☐ Check if different than previously reported. (ACC)

Washington

DC

20036

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00523621

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 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)☐ Convention (12C)☒ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

11

06

2012

in the
State of

DC

(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

2012

through

10

17

2012

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 Eliseo Medina

Signature of Treasurer

Eliseo Medina

[Electronically Filed]

Date

04

08

2013

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

Service Employees International Union PEA - Federal

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y
10 / 01 / 2012 To: M M / D D / Y Y Y Y Y Y
10 / 17 / 2012

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2012		0.00
(b) Cash on Hand at Beginning of Reporting Period.....	1911923.99	
(c) Total Receipts (from Line 19)	5800062.05	13419977.85
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7711986.04	13419977.85
7. Total Disbursements (from Line 31)	4538427.01	10246418.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	3173559.03	3173559.03
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	11276789.93	

☒ 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

Service Employees International Union PEA - Federal

Report Covering the Period:

From:

M M	/	D D	/	Y Y Y Y
10	/	01	/	2012

To:

M M	/	D D	/	Y Y Y Y
10	/	17	/	2012

I. Receipts
COLUMN A
Total This Period
COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

0.00

0.00

(ii) Unitemized

5800062.05

13419977.85

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

5800062.05

13419977.85

(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) ►

5800062.05

13419977.85

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ►

5800062.05

13419977.85

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

5800062.05

13419977.85

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	114081.70	538601.70
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	114081.70	538601.70
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1643262.52	4197402.02
24. Independent Expenditures (use Schedule E)	2635393.79	4703835.35
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	145689.00	806579.75
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	4538427.01	10246418.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4538427.01	10246418.82

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)	5800062.05	13419977.85
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	5800062.05	13419977.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	114081.70	538601.70
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	114081.70	538601.70

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. Citizen Action of NY

Mailing Address 94 Central Avenue

City Albany State NY Zip Code 12206-3002

Purpose of Disbursement
Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 04 2012
Transaction ID : D300151

Amount of Each Disbursement this Period

1007.10

Full Name (Last, First, Middle Initial)

B. Florida Consumer Action Network, Inc.
Mailing Address 3006 W Kennedy Blvd.
Ste B

City Tampa State FL Zip Code 33609-3289

Purpose of Disbursement
Canvass, Bird-dogging & Rallies(Non-Express Advocacy)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 04 2012
Transaction ID : D300152

Amount of Each Disbursement this Period

4142.47

Full Name (Last, First, Middle Initial)

C. Florida New Majority

Mailing Address 6127 NW 7th Avenue

City Miami State FL Zip Code 33127-1111

Purpose of Disbursement
Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

State: District:

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

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 04 2012
Transaction ID : D300153

Amount of Each Disbursement this Period

6629.35

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

11778.92

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. Minnesota State Council

Mailing Address 2233 University Avenue Suite 422

City	State	Zip Code
Saint Paul	MN	55114

Purpose of Disbursement
Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300090

Amount of Each Disbursement this Period

65103.00

Full Name (Last, First, Middle Initial)

B. Our DC

Mailing Address 1800 Massachusetts Ave NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300074

Amount of Each Disbursement this Period

18730.00

Full Name (Last, First, Middle Initial)

C. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City	State	Zip Code
Washington	DC	20036

Purpose of Disbursement
Debt Payment for Salary & Canvass-Related Expenses

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

Transaction ID : D300024

Amount of Each Disbursement this Period

517139.91

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

83833.00

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

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NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Debt Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 17 / 2012
Transaction ID : D300035

Amount of Each Disbursement this Period

345995.52

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-
Notice and 10/15 Report

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012
Transaction ID : D300049

Amount of Each Disbursement this Period

6540.75

Full Name (Last, First, Middle Initial)

C. SEIU Healthcare Wisconsin

Mailing Address 4513 Vernon Blvd Suite 300

City Madison State WI Zip Code 53705

Purpose of Disbursement
Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

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

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 04 / 2012
Transaction ID : D300150

Amount of Each Disbursement this Period

11929.03

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

18469.78

114081.70

**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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. AMERICA VOTES ACTION FUNDMailing Address 1155 CONNECTICUT AVE NW
SUITE 600

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		05		2012

Transaction ID : D300054

Amount of Each Disbursement this Period

250000.00

Full Name (Last, First, Middle Initial)

B. FLORIDA FREEDOM PAC

Mailing Address 8330 BISCAYNE BLVD SUITE 1

City MIAMI State FL Zip Code 33138

Purpose of Disbursement
Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		11		2012

Transaction ID : D300023

Amount of Each Disbursement this Period

927267.00

Full Name (Last, First, Middle Initial)

C. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
In-Kind Contribution for Salary and Other Canvass-Related Expenses from
10/1-11/6

Candidate Name

FLORIDA FREEDOM PACOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300033

Amount of Each Disbursement this Period

1483879.54

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1177267.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. SEIU General Fund

Mailing Address 1800 Massachusetts Ave NW

City
WashingtonState
DCZip Code
20036Purpose of Disbursement
Contribution for Salary and Other Canvass-Related Expenses from 7/29-8/31

Candidate Name

FLORIDA FREEDOM PAC

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		17		2012

Transaction ID : D300036

Amount of Each Disbursement this Period

345995.52

* In-Kind

Full Name (Last, First, Middle Initial)

B. SIERRA CLUB INDEPENDENT ACTION

Mailing Address 85 SECOND STREET SECOND FLOOR

City
SAN FRANCISCOState
CAZip Code
94105Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		02		2012

Transaction ID : D300022

Amount of Each Disbursement this Period

120000.00

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

465995.52

1643262.52

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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 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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. One Pennsylvania

Mailing Address 1500 North Second Street, Suite 11

City
HarrisburgState
PAZip Code
17102Purpose of Disbursement
Payment for Non-Federal Canvass Activities

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300087

Amount of Each Disbursement this Period

91555.00

Full Name (Last, First, Middle Initial)

B. SEIU Healthcare Michigan

Mailing Address 2604 4th Street

City
DetroitState
MIZip Code
48201Purpose of Disbursement
Payment for Non-Federal Canvass Activities

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300125

Amount of Each Disbursement this Period

21474.00

Full Name (Last, First, Middle Initial)

C. SEIU Local 1199 WOK

Mailing Address 1395 Dublin Road

City
ColumbusState
OHZip Code
43215Purpose of Disbursement
Payment for Non-Federal Canvass Activities

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300111

Amount of Each Disbursement this Period

25090.00

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

138119.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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 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)

Service Employees International Union PEA - Federal

Full Name (Last, First, Middle Initial)

A. United for New York, Inc.

Mailing Address 330 W 42nd Street, Suite 900

City	State	Zip Code
New York	NY	10036

Purpose of Disbursement
Payment for Non-Federal Canvass Activities

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
10		01		2012

Transaction ID : D300070

Amount of Each Disbursement this Period

7570.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Disbursement this Period

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

7570.00

145689.00

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 13 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Action United

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 846 N Broad St.

City State

Philadelphia

Zip Code

PA

19130-2234

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300061

Amount Incurred This Period

44130.20

Payment This Period

0.00

Outstanding Balance at Close of This Period

44130.20

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Alliance for Californians for Community Empowerment

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 3655 S. Grand Ave.

City State

Los Angeles

Zip Code

CA

90007-4316

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300059

Amount Incurred This Period

30591.32

Payment This Period

0.00

Outstanding Balance at Close of This Period

30591.32

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Citizen Action of NY

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 94 Central Avenue

City

Albany

State

NY

Zip Code

12206-3002

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300056

Amount Incurred This Period

6042.60

Payment This Period

0.00

Outstanding Balance at Close of This Period

6042.60

1) SUBTOTALS This Period This Page (optional)..... ►

80764.12

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 14 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Fair Share Alliance, Inc.

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 218 D Street, SE

City State

Zip Code

Washington

DC

20003-1900

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300057

Amount Incurred This Period

37892.26

Payment This Period

0.00

Outstanding Balance at Close of This Period

37892.26

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Florida Consumer Action Network, Inc.

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 3006 W Kennedy Blvd.

Ste B

City State

Zip Code

Tampa

FL

33609-3289

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300058

Amount Incurred This Period

34884.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

34884.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Florida New Majority

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 6127 NW 7th Avenue

City

State

Zip Code

Miami

FL

33127-1111

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300060

Amount Incurred This Period

39776.09

Payment This Period

0.00

Outstanding Balance at Close of This Period

39776.09

1) **SUBTOTALS** This Period This Page (optional)..... ►

112552.35

2) **TOTALS** This Period (last page this line number only)..... ►3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only) ►4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 15 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

One Pennsylvania

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Mailing Address 1500 North Second Street, Suite 11

City State

Zip Code

Harrisburg

PA

17102

Outstanding Balance Beginning This Period

19605.00

Transaction ID : D298042

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

19605.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Our DC

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Mailing Address 1800 Massachusetts Ave NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

45453.00

Transaction ID : D297985

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

45453.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU General Fund

Nature of Debt (Purpose):

Est. payment for salary and other canvass-related expenses from 6/20-9/30, bird-dogging & rallies

Mailing Address 1800 Massachusetts Ave NW

City

State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

517139.91

Transaction ID : D285704

Amount Incurred This Period

6206016.48

Payment This Period

517139.91

Outstanding Balance at Close of This Period

6206016.48

1) SUBTOTALS This Period This Page (optional)..... ►

6271074.48

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 16 OF 82

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU General Fund

Nature of Debt (Purpose):

Salary and other canvass-related expenses
from 6/11-9/30

Mailing Address 1800 Massachusetts Ave NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

4618526.33

Transaction ID : D286612

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

4618526.33

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Healthcare Wisconsin

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express
Advocacy)

Mailing Address 4513 Vernon Blvd Suite 300

City State

Zip Code

Madison

WI

53705

Outstanding Balance Beginning This Period

21751.00

Transaction ID : D298020

Amount Incurred This Period

69414.13

Payment This Period

0.00

Outstanding Balance at Close of This Period

91165.13

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Local 1199 WOK

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express
Advocacy)

Mailing Address 1395 Dublin Road

City

State

Zip Code

Columbus

OH

43215

Outstanding Balance Beginning This Period

14907.00

Transaction ID : D297979

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

14907.00

1) SUBTOTALS This Period This Page (optional)..... ►

4724598.46

2) TOTALS This Period (last page this line number only)..... ►

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

SCHEDULE D (FEC Form 3X)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 17 OF 82

FOR LINE NUMBER:
(check only one)
☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

Service Employees International Union PEA - Federal

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

SEIU Local 3

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Mailing Address 4 Bunker Hill Industrial Park

City State

Boston

Zip Code

MA

02129

Outstanding Balance Beginning This Period

22595.00

Transaction ID : D297935

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

22595.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

United for New York, Inc.

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies (Non-Express Advocacy)

Mailing Address 330 W 42nd Street, Suite 900

City State

New York

Zip Code

NY

10036

Outstanding Balance Beginning This Period

11101.00

Transaction ID : D298028

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

11101.00

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Working Families Organization, Inc.

Nature of Debt (Purpose):

Canvass, Bird-dogging & Rallies

Mailing Address 2 Nevins Street

City

Brooklyn

State

NY

Zip Code

11217-1010

Outstanding Balance Beginning This Period

0.00

Transaction ID : D300055

Amount Incurred This Period

54104.52

Payment This Period

0.00

Outstanding Balance at Close of This Period

54104.52

1) SUBTOTALS This Period This Page (optional)..... ►

87800.52

2) TOTALS This Period (last page this line number only)..... ►

11276789.93

3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) ►

0.00

4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ►

11276789.93

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 18 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 611 North Eutaw Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">20480.00</div>	
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294695
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 611 North Eutaw Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">19840.00</div>	
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294697
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">40320.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 19 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 611 North Eutaw Street			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">20480.00</div>	
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294698	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">155950.00</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore			Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
Mailing Address 611 North Eutaw Street			Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">1280.00</div>	
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294699	
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2688700.93</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">21760.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 20 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee Good Jobs Better Baltimore			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div> </div>	
Mailing Address 611 North Eutaw Street			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">1920.00</div>	
City Baltimore	State MD	Zip Code 21201	Transaction ID : D294700	
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2688700.93</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council			Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y Y Y</div> </div>	
Mailing Address 111 E Wacker			Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">86408.00</div>	
City Chicago	State IL	Zip Code 60601	Transaction ID : D294701	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY			Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2688700.93</div>			Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">88328.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M M

D D D

Y Y Y Y Y Y Y Y

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 21 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 111 E Wacker		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 45604.00 </div>	
City Chicago	State IL	Zip Code 60601	Transaction ID : D294702
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 320437.18 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU IL State Council		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 111 E Wacker		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 48005.00 </div>	
City Chicago	State IL	Zip Code 60601	Transaction ID : D294703
Purpose of Expenditure Est. payment for rally expenses		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">93609.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1395 Dublin Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Columbus	State OH	Zip Code 43215	Transaction ID : D294704
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1395 Dublin Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Columbus	State OH	Zip Code 43215	Transaction ID : D294705
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">50182.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Local 1199 WOK		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1395 Dublin Road		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 50182.00 </div>	
City Columbus	State OH	Zip Code 43215	Transaction ID : D294706
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16
Name of Federal Candidate Supported or Opposed by Expenditure: Betty Sutton		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 65864.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Our DC		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 28097.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294707
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">78279.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 24 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee Our DC		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 28097.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D294708
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <u>VA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 155950.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 2604 4th Street		Amount 45337.00	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294709
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73434.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Signature

Date

MM / DD / YYYY
 04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2604 4th Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 23862.00 </div>	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294710
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2604 4th Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 16703.00 </div>	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294711
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Debbie Stabenow		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 21475.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">40565.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date 10 / 01 / 2012	
Mailing Address 2604 4th Street		Amount 9545.00	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294712
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date 10 / 01 / 2012	
Mailing Address 2604 4th Street		Amount 9545.00	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294713
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	19090.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 27 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Michigan		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2604 4th Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Detroit	State MI	Zip Code 48201	Transaction ID : D294714
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House State: MI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Debbie Stabenow		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 21475.00 </div>	

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 333 41st Street, Suite 901		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294715
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 24518.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> _____ </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 28 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 333 41st Street, Suite 901		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294716
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 333 41st Street, Suite 901		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294717
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BILL NELSON		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 14760.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">29619.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 333 41st Street, Suite 901		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 9873.00 </div>	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294718
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 26
Name of Federal Candidate Supported or Opposed by Expenditure: JOSE ANTONIO GARCIA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 14760.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 333 41st Street, Suite 901		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 3291.00 </div>	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294719
Purpose of Expenditure Est. payment for rally expenses		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">13164.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee 1 Miami		Date 10 / 01 / 2012	
Mailing Address 333 41st Street, Suite 901		Amount 3291.00	
City Miami Beach	State FL	Zip Code 33140	Transaction ID : D294720 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for rally expenses		Category/Type 007	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 87380.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294721 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	90671.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 4513 Vernon Blvd Suite 300		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Madison	State WI	Zip Code 53705	Transaction ID : D294722
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 320437.18 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 4513 Vernon Blvd Suite 300		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Madison	State WI	Zip Code 53705	Transaction ID : D294723
Purpose of Expenditure Est. payment for direct mail		Category/Type 006	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 320437.18 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">87379.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 2080.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D294724
Purpose of Expenditure Est. payment for direct mail	Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 20186.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294731
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	22266.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

MM / DD / YYYY
 04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 10093.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294733
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <u>VA</u> <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 155950.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 63081.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294735
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	73174.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURESPAGE 34 OF 82
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M M / D D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 25232.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294736
Purpose of Expenditure Est. payment for direct mail		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date M M M / D D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 25232.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294737
Purpose of Expenditure Est. payment for direct mail		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	50464.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

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04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 25232.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294741 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for t-shirts and buttons		Category/ Type 006	Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee United for New York, Inc.		Date 10 / 01 / 2012	
Mailing Address 330 W 42nd Street, Suite 900		Amount 25232.00	
City New York	State NY	Zip Code 10036	Transaction ID : D294742 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for t-shirts and buttons		Category/ Type 006	Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	50464.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 01 / 2012</div>	
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">60206.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294752
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date MM / DD / YYYY <div style="border: 1px solid black; padding: 2px; display: inline-block;">10 / 01 / 2012</div>	
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">29986.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294753
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; display: inline-block;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">90192.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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04 / 08 / 2013

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 37 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>
City Harrisburg	State PA	Zip Code 17102
Purpose of Expenditure Est. payment for rally expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : D294755
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>
City Harrisburg	State PA	Zip Code 17102
Purpose of Expenditure Est. payment for rally expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">007</div>	Transaction ID : D294756
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">63848.50</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 38 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>		

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 1500 North Second Street, Suite 11		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">1363.00</div>	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D294757
Purpose of Expenditure Est. payment for t-shirts and buttons		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">006</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">2688700.93</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">42989.59</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294758
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>13</u>
Name of Federal Candidate Supported or Opposed by Expenditure: RODNEY DAVIS		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">64484.39</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border-bottom: 1px solid black; width: 150px; text-align: right;">44352.59</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border-bottom: 1px solid black; width: 150px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border-bottom: 1px solid black; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 39 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 35824.66 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294760
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>IL</u> <input type="checkbox"/> Senate District: <u>17</u> <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 263609.34 </div>			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 48000.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294761
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>MN</u> <input type="checkbox"/> Senate District: <u>08</u> <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J. CRAVAACK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 72000.00 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">83824.66</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 40 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 4413.02 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294763
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 22256.48 </div>			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 4413.02 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294764
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 12 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 191328.67 </div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 41 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
[MEMO ITEM]		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">42850.20</div>	
Mailing Address 1800 Massachusetts Ave NW		Transaction ID : D294765	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J. BENISHEK		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">16425.92</div>			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
[MEMO ITEM]		Amount <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">5399.65</div>	
Mailing Address 1800 Massachusetts Ave NW		Transaction ID : D294766	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">94750.92</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border-bottom: 1px solid black; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 42 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">3489.53</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294768
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2688700.93</div>			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M / D D / Y Y Y Y Y Y</div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">6118.26</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D294769
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">18354.80</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 43 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 64000.00	
City Washington	State DC	Zip Code 20036	Transaction ID : D294771
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 96000.00			

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin [MEMO ITEM]		Date 10 / 01 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 34707.07	
City Madison	State WI	Zip Code 53705	Transaction ID : D294774
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 26030.31			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	64000.00
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 44 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
[MEMO ITEM] Mailing Address 4513 Vernon Blvd Suite 300		Amount 34707.07	
City Madison	State WI	Zip Code 53705	Transaction ID : D294775
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 17353.54		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
[MEMO ITEM] Mailing Address 2 Nevins Street		Amount 18034.84	
City Brooklyn	State NY	Zip Code 11217-1010	Transaction ID : D294779
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: PA <input type="checkbox"/> Senate District: 08 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 22256.48		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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 04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 45 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
[MEMO ITEM] Mailing Address 2 Nevins Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 18034.84 </div>	
City Brooklyn	State NY	Zip Code 11217-1010	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 191328.67 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Working Families Organization, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
[MEMO ITEM] Mailing Address 2 Nevins Street		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 18034.84 </div>	
City Brooklyn	State NY	Zip Code 11217-1010	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18	
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 18081.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 46 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Citizen Action of NY		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 94 Central Avenue		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Albany	State NY	Zip Code 12206-3002	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 6042.60 </div>
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Transaction ID : D294786 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 18 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 18081.32 </div>	

Full Name (Last, First, Middle Initial) of Payee Fair Share Alliance, Inc.		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 218 D Street, SE		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 01 / 2012 </div>	
City Washington	State DC	Zip Code 20003-1900	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 37892.26 </div>
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Transaction ID : D294787 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 06 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 94750.92 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 6042.60 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 37892.26 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 43914.86 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 47 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div> </div>	

Full Name (Last, First, Middle Initial) of Payee Florida Consumer Action Network, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div> </div>	
[MEMO ITEM]			
Mailing Address 3006 W Kennedy Blvd. Ste B		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>	
City Tampa	State FL	Zip Code 33609-3289	Transaction ID : D294789
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: FL <input type="checkbox"/> Senate District: 13 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: C W BILL YOUNG		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Florida Consumer Action Network, Inc.		Date <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> </div> </div>	
[MEMO ITEM]			
Mailing Address 3006 W Kennedy Blvd. Ste B		Amount <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>	
City Tampa	State FL	Zip Code 33609-3289	Transaction ID : D294790
Purpose of Expenditure Canvass, Bird-dogging & Rallies		Category/ Type 001	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;"> <div style="display: flex; justify-content: space-between;"> <div></div> </div> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

MM / DD / YYYY

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 48 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Alliance for Californians for Community Empowerment		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
[MEMO ITEM] Mailing Address 3655 S. Grand Ave.		Amount 30591.32	
City Los Angeles	State CA	Zip Code 90007-4316	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 18354.80		Transaction ID : D294793	

Full Name (Last, First, Middle Initial) of Payee Florida New Majority		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
[MEMO ITEM] Mailing Address 6127 NW 7th Avenue		Amount 39776.09	
City Miami	State FL	Zip Code 33127-1111	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18 Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN B WEST		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 14916.02		Transaction ID : D294796	

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

Date

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 04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Action United		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 846 N Broad St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22065.10</div>	
City Philadelphia	State PA	Zip Code 19130-2234	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22256.48</div>		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Action United		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">01</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 846 N Broad St.		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">22065.10</div>	
City Philadelphia	State PA	Zip Code 19130-2234	
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">191328.67</div>		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 50 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 3066.66	
City Washington	State DC	Zip Code 20036	Transaction ID : D300148
Purpose of Expenditure Canvass, Bird-dogging & Rallies	Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 8427.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300155
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) 	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	11493.66
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

MM / DD / YYYY
 04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 51 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 8427.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300156
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/1-11/6		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: ELIZABETH WARREN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 43819.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 25280.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300158
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 006	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	33707.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

MM / DD / YYYY
 04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 52 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 8427.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300160
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 006	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ELIZABETH WARREN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 43819.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 20224.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300161
Purpose of Expenditure Est. payment for direct mail	Category/ Type 006	Office Sought: <input type="checkbox"/> House State: MA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: ELIZABETH WARREN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 43819.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	28651.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 53 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 3371.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300162 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for buttons & t-shirts		Category/ Type 006	Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date M M / D D / Y Y Y Y Y Y 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 3371.00	
City Boston	State MA	Zip Code 02129	Transaction ID : D300163 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for buttons & t-shirts		Category/ Type 006	Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	6742.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 54 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-between;"> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> <div>MM / DD / YYYY</div> </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU Local 3		Date MM / DD / YYYY 10 / 01 / 2012	
Mailing Address 4 Bunker Hill Industrial Park		Amount 6741.00	
City Boston	State MA	Zip Code 02129	
Purpose of Expenditure Est. payment for buttons & t-shirts	Category/ Type 006	Transaction ID : D300164 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: ELIZABETH WARREN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 43819.00			

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date MM / DD / YYYY 10 / 02 / 2012	
Mailing Address 5585 Pershing Ave. Ste 120		Amount 52225.00	
City Saint Louis	State MO	Zip Code 63112	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/2-11/6	Category/ Type 001	Transaction ID : D294693 Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 53963.86			

(a) SUBTOTAL of Itemized Independent Expenditures.....	58966.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

Signature

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Date

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04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 55 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date 10 / 02 / 2012	
Mailing Address 5585 Pershing Ave. Ste 120		Amount 52225.00	
City Saint Louis	State MO	Zip Code 63112	Transaction ID : D294694
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/2-11/6		Category/Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Terra Strategies, LLC		Date 10 / 02 / 2012	
Mailing Address 100 East Grand Ave. Suite 380		Amount 106857.16	
City Des Moines	State IA	Zip Code 50309	Transaction ID : D294813
Purpose of Expenditure Payment for Canvassing Services		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>17</u>
Name of Federal Candidate Supported or Opposed by Expenditure: CHERI BUSTOS		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 263609.34		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	159082.16
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Field Strategies Inc		Date 10 / 04 / 2012	
Mailing Address 888 16th St NW Ste 650		Amount 80000.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D295048
Purpose of Expenditure Payment for Canvassing Services Beginning on 10/4		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee Field Strategies Inc		Date 10 / 04 / 2012	
Mailing Address 888 16th St NW Ste 650		Amount 80000.00	
City Washington	State DC	Zip Code 20006	Transaction ID : D295049
Purpose of Expenditure Payment for Canvassing Services Beginning on 10/4		Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 155950.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	160000.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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Signature

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04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7508.18</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300037 Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">2688700.93</div>			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">10747.40</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300038 Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: RODNEY DAVIS			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">64484.39</div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">18255.58</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

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Eliseo Medina

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Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 14070.36 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300039
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>IL</u> District: <u>17</u>
Name of Federal Candidate Supported or Opposed by Expenditure: ROBERT T. SCHILLING		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 263609.34 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 12000.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300040
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>MN</u> District: <u>08</u>
Name of Federal Candidate Supported or Opposed by Expenditure: RAYMOND J. CRAVAACK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 72000.00 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">26070.36</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

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Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 59 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11128.24 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300041
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL G. FITZPATRICK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 22256.48 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 11128.24 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300042
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12
Name of Federal Candidate Supported or Opposed by Expenditure: MARK CRITZ		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 191328.67 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">22256.48</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 8212.96 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300043
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: MI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL J. BENISHEK		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 16425.92 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 8676.77 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300044
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 07 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: SEAN DUFFY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 17353.54 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">16889.73</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 04 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 8676.77	
City Washington	State DC	Zip Code 20036	Transaction ID : D300045
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 26030.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date MM / DD / YYYY 10 / 04 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 8676.77	
City Washington	State DC	Zip Code 20036	Transaction ID : D300046
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08
Name of Federal Candidate Supported or Opposed by Expenditure: REID RIBBLE		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 26030.31		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	17353.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

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 04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 6019.36 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300047
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: NY <input type="checkbox"/> Senate District: 18 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: NAN HAYWORTH		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 18081.32 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 8525.76 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300048
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 94750.92 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">14545.12</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 63 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">9177.40</div>	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 07
Name of Federal Candidate Supported or Opposed by Expenditure: DANIEL E. LUNGREN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">18354.80</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M M</div> <div style="border: 1px solid black; padding: 2px;">D D D</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">7458.01</div>	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 18
Name of Federal Candidate Supported or Opposed by Expenditure: ALLEN B WEST		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">14916.02</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">16635.41</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 64 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 16000.00 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300052 Office Sought: <input checked="" type="checkbox"/> House State: OH <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose
Purpose of Expenditure Payment for Canvassing, Bird Dogging & Rallies Disclosed on 9/24 HR-Notice and 10/15 Report		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: BILL JOHNSON		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 96000.00 </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 74311.18 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D295884 Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 320437.18 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 16000.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 74311.18 </div>
(c) TOTAL Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 90311.18 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 65 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 124205.98 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D295885
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 24101.69 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
[MEMO ITEM]		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">10</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">06</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2012</div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 405836.40 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D295886
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">001</div>	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 220496.68 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 66 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">47851.42</div>	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 06
Name of Federal Candidate Supported or Opposed by Expenditure: MICHAEL COFFMAN		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">94750.92</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">124205.98</div>	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">24101.69</div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 67 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		M M / D D / Y Y Y Y Y Y	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 275825.66	
City Washington	State DC	Zip Code 20036	Transaction ID : D296084
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: VA <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: TIMOTHY MICHAEL KAINE		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 155950.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund [MEMO ITEM]		Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 47851.42	
City Washington	State DC	Zip Code 20036	Transaction ID : D296085
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94750.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....	0.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina
 Signature [Electronically Filed] Date

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04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 68 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
[MEMO ITEM]			
Mailing Address 1800 Massachusetts Ave NW			
City Washington	State DC	Zip Code 20036	Amount <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">1128959.56</div>
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____ Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">2688700.93</div>		Transaction ID : D296086	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">M M M</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 40px; text-align: center;">D D D</div> / <div style="display: inline-block; border-bottom: 1px solid black; width: 100px; text-align: center;">Y Y Y Y Y Y Y Y</div>	
[MEMO ITEM]			
Mailing Address 1800 Massachusetts Ave NW			
City Washington	State DC	Zip Code 20036	Amount <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">26410.65</div>
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03 Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE PACE II		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought <div style="border-bottom: 1px solid black; width: 150px; text-align: right;">21421.61</div>		Transaction ID : D296087	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border-bottom: 1px solid black; width: 150px; text-align: right;">0.00</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border-bottom: 1px solid black; width: 150px;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border-bottom: 1px solid black; width: 150px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 69 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012	
[MEMO ITEM]		Amount 70657.40	
Mailing Address 1800 Massachusetts Ave NW		Transaction ID : D296088	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Est. payment for salary and other canvass-related expenses from 10/6-10/20		Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>VA</u> District: <u>02</u>
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL ODELL HIRSCHBIEL JR		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 85433.29		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee Our DC		Date M M / D D / Y Y Y Y Y Y 10 / 06 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 28096.75	
City Washington		State DC	Zip Code 20036
Purpose of Expenditure Est. payment for rally expenses		Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: _____ District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 2688700.93		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	28096.75
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 70 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 4513 Vernon Blvd Suite 300		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 06 / 2012 </div>	
City Madison	State WI	Zip Code 53705	Transaction ID : D296121
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 4513 Vernon Blvd Suite 300		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 10 / 06 / 2012 </div>	
City Madison	State WI	Zip Code 53705	Transaction ID : D296123
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 320437.18 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">10402.33</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 71 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M / D D / Y Y Y Y Y Y 10 / 11 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1703.75	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D297060
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M / D D / Y Y Y Y Y Y 10 / 11 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1703.75	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D297061
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	3407.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date M M / D D / Y Y Y Y Y Y 10 / 13 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 5548.00	
City Madison	State WI	Zip Code 53705	Transaction ID : D297058
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee SEIU Healthcare Wisconsin		Date M M / D D / Y Y Y Y Y Y 10 / 13 / 2012	
Mailing Address 4513 Vernon Blvd Suite 300		Amount 4854.34	
City Madison	State WI	Zip Code 53705	Transaction ID : D297059
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 320437.18			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	10402.34
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Fieldworks		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2852 Connecticut Ave., NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 46835.93 </div>	
City Washington	State DC	Zip Code 20008	Transaction ID : D298361
Purpose of Expenditure Payment for Canvassing Services	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>	

Full Name (Last, First, Middle Initial) of Payee Fieldworks		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 2852 Connecticut Ave., NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 23417.96 </div>	
City Washington	State DC	Zip Code 20008	Transaction ID : D298362
Purpose of Expenditure Payment for Canvassing Services	Category/ Type 001	Office Sought: <input checked="" type="checkbox"/> House State: CO <input type="checkbox"/> Senate District: 06 <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought		<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 94750.92 </div>	

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 70253.89 </div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 0.00 </div>
(c) TOTAL Independent Expenditures.....	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 70253.89 </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 74 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee Fieldworks		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 2852 Connecticut Ave., NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 23417.96 </div>	
City Washington	State DC	Zip Code 20008	Transaction ID : D298363
Purpose of Expenditure Payment for Canvassing Services	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input checked="" type="checkbox"/> House State: <u>CO</u> <input type="checkbox"/> Senate District: <u>07</u> <input type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: Edwin Perlmutter		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 23417.96 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M M / D D D / Y Y Y Y Y Y </div>	
Mailing Address 5585 Pershing Ave. Ste 120		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1738.86 </div>	
City Saint Louis	State MO	Zip Code 63112	Transaction ID : D298364
Purpose of Expenditure Est. payment for canvass-related expenses	Category/ Type <div style="border: 1px solid black; padding: 2px; display: inline-block;">001</div>	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 2688700.93 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">25156.82</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on MM / DD / YYYY		

Full Name (Last, First, Middle Initial) of Payee SEIU Missouri Kansas State Council		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address 5585 Pershing Ave. Ste 120		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1738.86</div>
City Saint Louis	State MO	
Zip Code 63112	Transaction ID : D298365	
Purpose of Expenditure Est. payment for canvass related-expenses	Category/ Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: Claire McCaskill		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 53963.86		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

Full Name (Last, First, Middle Initial) of Payee Wisconsin Jobs Now		Date MM / DD / YYYY 10 / 15 / 2012
Mailing Address PO BOX 511506		Amount <div style="border: 1px solid black; padding: 2px; display: inline-block;">1500.00</div>
City Milwaukee	State WI	
Zip Code 53203	Transaction ID : D298366	
Purpose of Expenditure Voter Outreach Literature	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 01
Name of Federal Candidate Supported or Opposed by Expenditure: ROB ZERBAN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose
Calendar Year-To-Date Per Election for Office Sought 3000.00		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____

(a) SUBTOTAL of Itemized Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;">3238.86</div>
(b) SUBTOTAL of Unitemized Independent Expenditures	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>
(c) TOTAL Independent Expenditures.....	<div style="border: 1px solid black; padding: 2px; display: inline-block;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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 04 / 08 / 2013

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 76 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Wisconsin Jobs Now		Date M M / D D / Y Y Y Y Y Y 10 / 15 / 2012	
Mailing Address PO BOX 511506		Amount 1500.00	
City Milwaukee	State WI	Zip Code 53203	Transaction ID : D298367
Purpose of Expenditure Voter Outreach Literature	Category/ Type 006	Office Sought: <input checked="" type="checkbox"/> House State: WI <input type="checkbox"/> Senate District: 01 <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL D. RYAN		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 3000.00			

Full Name (Last, First, Middle Initial) of Payee Our DC		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 28096.75	
City Washington	State DC	Zip Code 20036	Transaction ID : D298368
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House State: <input type="checkbox"/> Senate District: <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	29596.75
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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 04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

 PAGE 77 OF 82
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1703.75	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D298369
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee One Pennsylvania		Date M M / D D / Y Y Y Y Y Y 10 / 16 / 2012	
Mailing Address 1500 North Second Street, Suite 11		Amount 1703.75	
City Harrisburg	State PA	Zip Code 17102	Transaction ID : D298370
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	3407.50
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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04 / 08 / 2013

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee Our DC		Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 28096.75	
City Washington	State DC	Zip Code 20036	Transaction ID : D298688
Purpose of Expenditure Est. payment for rally expenses	Category/ Type 007	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input type="checkbox"/> Support <input checked="" type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: MITT ROMNEY		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 331119.24	
City Washington	State DC	Zip Code 20036	Transaction ID : D300025
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice	Category/ Type 001	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate Supported or Opposed by Expenditure: BARACK OBAMA		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) _____	
Calendar Year-To-Date Per Election for Office Sought 2688700.93			

(a) SUBTOTAL of Itemized Independent Expenditures.....	359215.99
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures.....	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y
 04 / 08 / 2013

Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 1490.83 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300026
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03
Name of Federal Candidate Supported or Opposed by Expenditure: SALVATORE PACE II		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 21421.61 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> M M / D D / Y Y Y Y Y Y </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 12052.78 </div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300027
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02
Name of Federal Candidate Supported or Opposed by Expenditure: PAUL ODELL HIRSCHBIEL JR		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"> 85433.29 </div>		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;">13543.61</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; display: inline-block;"> </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Date

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Signature

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 31425.73	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <u>CO</u> District: <u>06</u>
Name of Federal Candidate Supported or Opposed by Expenditure: JOE MIKLOSI		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 94750.92		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D300028

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 15538.95	
City Washington	State DC	Zip Code 20036	
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: <u>NV</u> District: _____
Name of Federal Candidate Supported or Opposed by Expenditure: SHELLEY BERKLEY		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24101.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Transaction ID : D300029

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	46964.68
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Eliseo Medina

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Signature

Date

04 / 08 / 2013

SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C00523621 </div>
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on M M / D D / Y Y Y Y Y Y		

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 15538.95	
City Washington	State DC	Zip Code 20036	Transaction ID : D300030
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 04
Name of Federal Candidate Supported or Opposed by Expenditure: STEVEN ALEXZANDER HORSFORD		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 24101.69		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date M M / D D / Y Y Y Y Y Y 10 / 17 / 2012	
Mailing Address 1800 Massachusetts Ave NW		Amount 84933.33	
City Washington	State DC	Zip Code 20036	Transaction ID : D300031
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OH District:
Name of Federal Candidate Supported or Opposed by Expenditure: SHERROD BROWN		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 220496.68		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2012 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	100472.28
(b) SUBTOTAL of Unitemized Independent Expenditures▶	
(c) TOTAL Independent Expenditures.....▶	

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Eliseo Medina

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SCHEDULE E (FEC Form 3X)
ITEMIZED INDEPENDENT EXPENDITURES

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 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) Service Employees International Union PEA - Federal		FEC IDENTIFICATION NUMBER ▼ C C00523621	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	

Full Name (Last, First, Middle Initial) of Payee SEIU General Fund		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address 1800 Massachusetts Ave NW		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;">25040.10</div>	
City Washington	State DC	Zip Code 20036	Transaction ID : D300032 Office Sought: <input type="checkbox"/> House State: WI <input checked="" type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Purpose of Expenditure Payment for Salary & Other Canvass-Related Expenses from 7/29-8/31 Disclosed on 7/31 48-HR Notice		Category/Type 001	
Name of Federal Candidate Supported or Opposed by Expenditure: Tammy Baldwin			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;">320437.18</div>			

Full Name (Last, First, Middle Initial) of Payee		Date <div style="display: flex; justify-content: space-around;"> <div style="border: 1px solid black; padding: 2px;">M M /</div> <div style="border: 1px solid black; padding: 2px;">D D /</div> <div style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</div> </div>	
Mailing Address		Amount <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>	
City	State	Zip Code	Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input type="checkbox"/> President Check One: <input type="checkbox"/> Support <input type="checkbox"/> Oppose Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ _____
Purpose of Expenditure		Category/Type	
Name of Federal Candidate Supported or Opposed by Expenditure:			
Calendar Year-To-Date Per Election for Office Sought <div style="border: 1px solid black; padding: 2px; text-align: right;"></div>			

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">25040.10</div>
(b) SUBTOTAL of Unitemized Independent Expenditures▶	<div style="border: 1px solid black; padding: 2px; text-align: right;"></div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px; text-align: right;">2635393.79</div>

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Eliseo Medina

[Electronically Filed]

Date

M M /

D D /

Y Y Y Y Y Y

Signature