

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

ADDRESS (number and street) 1775 K STREET N.W.

Check if different than previously reported. (ACC) WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00002766

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

### 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                                 |                                       |                                                                |
|--------------------------------------|-------------------------------------------------|---------------------------------------|----------------------------------------------------------------|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5)            | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7)            | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |                                           |                                        |                                       |
|-------------------------------------------|----------------------------------------|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |                                        |                                       |                                        |
|----------------------------------------|---------------------------------------|----------------------------------------|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|----------------------------------------|---------------------------------------|----------------------------------------|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2009 through 05 31 2009

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 ANTHONY M PERRONE

Signature of Treasurer Electronically Filed by ANTHONY M PERRONE Date 06 18 2009

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							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		689603.23
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period .....	1301724.44									
(c) Total Receipts (from Line 19) .....	317643.08	1492586.42								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1619367.52	2182189.65								
7. Total Disbursements (from Line 31) .....	109800.00	672622.13								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1509567.52	1509567.52								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	5584.27	18170.03
(i) Itemized (use Schedule A) .....	285805.39	1434804.08
(ii) Unitemized .....	291389.66	1452974.11
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	291389.66	1452974.11
12. Transfers From Affiliated/Other Party Committees .....	26218.42	27233.92
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.) .....	35.00	12378.39
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	317643.08	1492586.42
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	317643.08	1492586.42

**DETAILED SUMMARY PAGE**

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	60.00	6982.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	60.00	6982.25
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	91200.00	454250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	18540.00	211389.88
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	109800.00	672622.13
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	109800.00	672622.13

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3 .....	291389.66	1452974.11
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	291389.66	1452974.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	60.00	6982.25
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	60.00	6982.25

Form/Schedule : **F3XN**

Transaction ID :

The Detailed Summary Page and Schedule A reflect the amount of itemized (\$5,584.27) and unitemized (\$285,805.39) receipts.

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) CHERYL J AQUILINO		Date of Receipt MM / DD / YYYY 05 / 05 / 2009		
	Mailing Address 30 Stergis Way		<b>Transaction ID:</b> SA11AI.17105		
	City Dedham	State MA	Zip Code 02026	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 1445	Occupation L/U REPRESENTATIVE			
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 300.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) MARTIN H BABB		Date of Receipt MM / DD / YYYY 05 / 06 / 2009		
	Mailing Address 5030 First Avenue South Suite 200		<b>Transaction ID:</b> SA11AI.17450		
	City Seattle	State WA	Zip Code 98134	Amount of Each Receipt this Period 45.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 0021	Occupation L/U REPRESENTATIVE			
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 225.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) DOUGLAS A BELANGER		Date of Receipt MM / DD / YYYY 05 / 05 / 2009		
	Mailing Address 30 Stergis Way		<b>Transaction ID:</b> SA11AI.16991		
	City Dedham	State MA	Zip Code 02026	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 1445	Occupation L/U REPRESENTATIVE			
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 300.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	205.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 39  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.** Full Name (Last, First, Middle Initial)  
**ROBERT M BERMAN**

Mailing Address **30 Stergis Way**

City **Dedham** State **MA** Zip Code **02026**

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

Name of Employer **UFCW LOCAL 1445** Occupation **L/U REPRESENTATIVE**

Receipt For: 2009  
 Primary  General  
 Other (specify) **Other**

Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 05 / 2009**  
**Transaction ID: SA11AI.17001**  
 Amount of Each Receipt this Period **80.00**

**B.** Full Name (Last, First, Middle Initial)  
**JEFFREY A BOLLEN**

Mailing Address **30 Stergis Way**

City **Dedham** State **MA** Zip Code **02026**

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

Name of Employer **UFCW LOCAL 1445** Occupation **L/U REPRESENTATIVE**

Receipt For: 2009  
 Primary  General  
 Other (specify) **Other**

Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 05 / 2009**  
**Transaction ID: SA11AI.16953**  
 Amount of Each Receipt this Period **80.00**

**C.** Full Name (Last, First, Middle Initial)  
**BRUCE W BOTH**

Mailing Address **221-10 Jamaica Avenue**

City **Queens Village** State **NY** Zip Code **11428**

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

Name of Employer **UFCW LOCAL 1500** Occupation **Non-Dir Intl VP**

Receipt For: 2009  
 Primary  General  
 Other (specify) **Other**

Aggregate Year-to-Date **300.00**

Date of Receipt **05 / 19 / 2009**  
**Transaction ID: SA11AI.17181**  
 Amount of Each Receipt this Period **300.00**

**SUBTOTAL** of Receipts This Page (optional) ..... **460.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN P BOWEN		Date of Receipt
	Mailing Address 7760 West 38th Avenue Suite 400		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 3 / 2 0 0 9
	City	State	Zip Code
	Wheat Ridge	CO	80033
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.18071
Name of Employer UFCW LOCAL 0007R		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 277.05	<input type="text"/> 73.88

<b>B.</b>	Full Name (Last, First, Middle Initial) THOMAS D BROWN		Date of Receipt
	Mailing Address 30 Stergis Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 5 / 2 0 0 9
	City	State	Zip Code
	Dedham	MA	02026
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16994
Name of Employer UFCW LOCAL 1445		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 80.00

<b>C.</b>	Full Name (Last, First, Middle Initial) JOSEPH A CASTELLI		Date of Receipt
	Mailing Address 221-10 Jamaica Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 9 / 2 0 0 9
	City	State	Zip Code
	Queens Village	NY	11428
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.17171
Name of Employer UFCW LOCAL 1500		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 453.88
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 39
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) RICHARD O CHARETTE		Date of Receipt MM / DD / YYYY 05 / 05 / 2009		
	Mailing Address 30 Stergis Way		<b>Transaction ID:</b> SA11AI.16977		
	City Dedham	State MA	Zip Code 02026	Amount of Each Receipt this Period 90.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 1445		Occupation L/U PRESIDENT		
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 310.00			

<b>B.</b>	Full Name (Last, First, Middle Initial) ELIZABETH M DAY		Date of Receipt MM / DD / YYYY 05 / 05 / 2009		
	Mailing Address 30 Stergis Way		<b>Transaction ID:</b> SA11AI.17013		
	City Dedham	State MA	Zip Code 02026	Amount of Each Receipt this Period 80.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 1445		Occupation L/U REPRESENTATIVE		
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 300.00			

<b>C.</b>	Full Name (Last, First, Middle Initial) CRISANTA D DURAN		Date of Receipt MM / DD / YYYY 05 / 13 / 2009		
	Mailing Address 7760 West 38th Avenue Suite 400		<b>Transaction ID:</b> SA11AI.18089		
	City Wheat Ridge	State CO	Zip Code 80033	Amount of Each Receipt this Period 40.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer UFCW LOCAL 0007R		Occupation L/U REPRESENTATIVE		
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date 210.00			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>210.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

<b>A.</b>	Full Name (Last, First, Middle Initial) ERNEST L DURAN, JR	Date of Receipt
	Mailing Address 7760 West 38th Avenue Suite 400	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 3 / 2 0 0 9
	City State Zip Code Wheat Ridge CO 80033	<b>Transaction ID:</b> SA11AI.18074
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 59.89
	Name of Employer Occupation UFCW LOCAL 0007R Non-Dir Intl VP	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other	Aggregate Year-to-Date <input type="text"/> 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) DEAN J ETHIER	Date of Receipt
	Mailing Address 30 Stergis Way	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 5 / 2 0 0 9
	City State Zip Code Dedham MA 02026	<b>Transaction ID:</b> SA11AI.16969
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 80.00
	Name of Employer Occupation UFCW LOCAL 1445 L/U REPRESENTATIVE	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other	Aggregate Year-to-Date <input type="text"/> 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT B FUNCK	Date of Receipt
	Mailing Address 221-10 Jamaica Avenue	<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 9 / 2 0 0 9
	City State Zip Code Queens Village NY 11428	<b>Transaction ID:</b> SA11AI.17169
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 300.00
	Name of Employer Occupation UFCW LOCAL 1500 L/U REPRESENTATIVE	
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="text"/> Other	Aggregate Year-to-Date <input type="text"/> 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 439.89
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) MARK A GOVONI		Date of Receipt
	Mailing Address 30 Stergis Way		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Dedham	MA	02026
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16998
Name of Employer UFCW LOCAL 1445		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text"/> 80.00
		<input type="text"/> 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) FAYE I GUENTHER		Date of Receipt
	Mailing Address 5030 First Avenue South Suite 200		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Seattle	WA	98134
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.18269
Name of Employer UFCW LOCAL 0021		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text"/> 45.00
		<input type="text"/> 225.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) SALLY L HARDS		Date of Receipt
	Mailing Address Post Office Box 23555		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Tigard	OR	97281
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.18185
Name of Employer UFCW LOCAL 0555		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text"/> 107.50
		<input type="text"/> 247.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 232.50
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A.**

Full Name (Last, First, Middle Initial)  
JOSEPH A HAYES

Mailing Address 30 Stergis Way

City State Zip Code  
Dedham MA 02026

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

Name of Employer Occupation  
UFCW LOCAL 1445 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

Transaction ID: SA11AI.17000

Amount of Each Receipt this Period  
80.00

**B.**

Full Name (Last, First, Middle Initial)  
JOHN C KACHADOORIN

Mailing Address 30 Stergis Way

City State Zip Code  
Dedham MA 02026

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

Name of Employer Occupation  
UFCW LOCAL 1445 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 290.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

Transaction ID: SA11AI.16940

Amount of Each Receipt this Period  
80.00

**C.**

Full Name (Last, First, Middle Initial)  
MARK D LAURITSEN

Mailing Address 1775 K STREET N.W.

City State Zip Code  
WASHINGTON DC 20006

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

Name of Employer Occupation  
UFCW INTERNATIONAL UNION International Vice President/D

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2009

Transaction ID: SA11AI.17977

Amount of Each Receipt this Period  
50.00

**SUBTOTAL** of Receipts This Page (optional) ..... **210.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A.**

Full Name (Last, First, Middle Initial)  
ROBERT G LENNON

Mailing Address 30 Stergis Way

City State Zip Code  
Dedham MA 02026

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

Name of Employer Occupation  
UFCW LOCAL 1445 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 310.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

**Transaction ID:** SA11AI.17004

Amount of Each Receipt this Period  
90.00

**B.**

Full Name (Last, First, Middle Initial)  
ESTHER R LOPEZ

Mailing Address 1775 K STREET N.W.

City State Zip Code  
WASHINGTON DC 20006

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

Name of Employer Occupation  
UFCW INTERNATIONAL UNION Department Director

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2009

**Transaction ID:** SA11AI.18525

Amount of Each Receipt this Period  
50.00

**C.**

Full Name (Last, First, Middle Initial)  
SARAH C LORENZINI

Mailing Address 5030 First Avenue South Suite 200

City State Zip Code  
Seattle WA 98134

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

Name of Employer Occupation  
UFCW LOCAL 0021 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 225.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

**Transaction ID:** SA11AI.18244

Amount of Each Receipt this Period  
45.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **185.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) SHARON MAEDA		Date of Receipt
	Mailing Address 5030 First Avenue South Suite 200		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 6 / 2 0 0 9
	City	State	Zip Code
	Seattle	WA	98134
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.18205
Name of Employer UFCW LOCAL 0021		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 225.00	45.00

<b>B.</b>	Full Name (Last, First, Middle Initial) JEFFREY S MAUSSER		Date of Receipt
	Mailing Address 221-10 Jamaica Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 1 9 / 2 0 0 9
	City	State	Zip Code
	Queens Village	NY	11428
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17101
Name of Employer UFCW LOCAL 1500		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 300.00	300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) PETER J MCCAUL		Date of Receipt
	Mailing Address 30 Stergis Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 0 5 / 2 0 0 9
	City	State	Zip Code
	Dedham	MA	02026
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.17009
Name of Employer UFCW LOCAL 1445		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼ 290.00	80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>425.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 39  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial)  
JOSEPH E MIZRAHI

Mailing Address 5030 First Avenue South  
Suite 200

City State Zip Code  
Seattle WA 98134

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

Name of Employer Occupation  
UFCW LOCAL 0021 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 215.00

Date of Receipt  
MM / DD / YYYY  
05 / 06 / 2009

Transaction ID: SA11AI.18291

Amount of Each Receipt this Period  
43.00

**B.**

Full Name (Last, First, Middle Initial)  
RHONDA C NELSON

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17670

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
ROBERT W NEWELL

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17180

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **643.00**

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

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

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

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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

<b>A.</b>	Full Name (Last, First, Middle Initial) DENNIS P NORTON		Date of Receipt
	Mailing Address 30 Stergis Way		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 05 / 2009
	City	State	Zip Code
	Dedham	MA	02026
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16931
Name of Employer UFCW LOCAL 1445		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼ 310.00	90.00

<b>B.</b>	Full Name (Last, First, Middle Initial) JACQUELINE NOWELL		Date of Receipt
	Mailing Address 1775 K STREET N.W.		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 13 / 2009
	City	State	Zip Code
	WASHINGTON	DC	20006
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.16930
Name of Employer UFCW INTERNATIONAL UNION		Occupation Office Director	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼ 250.00	50.00

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL S ONUFRAK		Date of Receipt
	Mailing Address 221-10 Jamaica Avenue		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 19 / 2009
	City	State	Zip Code
	Queens Village	NY	11428
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.17143
Name of Employer UFCW LOCAL 1500		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼ 300.00	300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>440.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 39  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12		
<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A.**

Full Name (Last, First, Middle Initial)  
THERESA QUINONES

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17061

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
JAMES M RONAYNE

Mailing Address 30 Stergis Way

City State Zip Code  
Dedham MA 02026

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

Name of Employer Occupation  
UFCW LOCAL 1445 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 05 / 2009

Transaction ID: SA11AI.16966

Amount of Each Receipt this Period  
80.00

**C.**

Full Name (Last, First, Middle Initial)  
LEONARD SALVO

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17078

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **680.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 39  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
-------------------------------------	-----	--------------------------	-----	--------------------------	-----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----	--------------------------	----

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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial)  
WALTER G SAUTER

Mailing Address 1775 K. STREET N.W.

City State Zip Code  
WASHINGTON DC 20006

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

Name of Employer Occupation  
UFCW LOCAL RETR Retired International Executiv

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 13 / 2009

Transaction ID: SA11AI.17330

Amount of Each Receipt this Period  
50.00

**B.**

Full Name (Last, First, Middle Initial)  
JULIUS SCORZELLI

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17168

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
LYNN M SHIELS

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt  
MM / DD / YYYY  
05 / 19 / 2009

Transaction ID: SA11AI.17119

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **650.00**

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

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

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

FOR LINE NUMBER: PAGE 20 / 39

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A.**

Full Name (Last, First, Middle Initial)

EMILY K STEWART

Mailing Address 1775 K STREET N.W.

City State Zip Code  
WASHINGTON DC 20006

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

Name of Employer Occupation  
UFCW INTERNATIONAL UNION Special Assistant to the Direc

Receipt For: 2009  
 Primary  General  
 Other (specify) Other  
Aggregate Year-to-Date 250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 5 / 1 3 / 2 0 0 9

Transaction ID: SA11AI.17433

Amount of Each Receipt this Period

50.00

**B.**

Full Name (Last, First, Middle Initial)

LEROY WASHINGTON

Mailing Address 221-10 Jamaica Avenue

City State Zip Code  
Queens Village NY 11428

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

Name of Employer Occupation  
UFCW LOCAL 1500 L/U REPRESENTATIVE

Receipt For: 2009  
 Primary  General  
 Other (specify) Other  
Aggregate Year-to-Date 300.00

Date of Receipt

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

Transaction ID: SA11AI.17451

Amount of Each Receipt this Period

300.00

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

350.00

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

5584.27

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 21 / 39	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial) International Chemical Workers		Date of Receipt
Mailing Address Council of the UFCW 1799 Akron-Peninsula Road		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 5 / 2 6 / 2 0 0 9
City Akron	State OH	Zip Code 44313
FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA12.18565
Name of Employer		Occupation
Receipt For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Amount of Each Receipt this Period 26218.42
Aggregate Year-to-Date ▼ 26218.42		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>26218.42</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>26218.42</b>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)

CHEVY CHASE BANK

Mailing Address 6151 CHEVY CHASE DRIVE

City LAUREL State MD Zip Code 20707

Purpose of Disbursement  
MAY 2009 BANK SERVICE FEES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼

State: District:

OTHER

Transaction ID: SB21B.18636

Date of Disbursement

05 / 31 / 2009

Amount of Each Disbursement this Period

60.00

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

60.00

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

60.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)  
ADAM SMITH FOR CONGRESS

Transaction ID: SB23.18615  
Date of Disbursement

Mailing Address POST OFFICE BOX 23626

/   /

City FEDERAL WAY State WA Zip Code 98093

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION WA - C.D. # 09

Candidate Name  
ADAM SMITH

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: WA District: 09

B.

Full Name (Last, First, Middle Initial)  
A WHOLE LOT OF PEOPLE

Transaction ID: SB23.18613  
Date of Disbursement

Mailing Address FOR GRIJALVA  
POST OFFICE BOX 1242

/   /

City TUCSON State AZ Zip Code 85702

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION AZ - C.D. # 07

Candidate Name  
RAUL GRIJALVA

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: AZ District: 07

C.

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

Transaction ID: SB23.18591  
Date of Disbursement

Mailing Address POST OFFICE BOX 390

/   /

City WATERLOO State IA Zip Code 50704

Amount of Each Disbursement this Period

Purpose of Disbursement  
CONTRIBUTION IA - C.D. # 01

Candidate Name  
BRUCE BRALEY

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: IA District: 01

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

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) BRIDGE PAC <hr/> Mailing Address 499 SOUTH CAPITOL STREET SW SUITE 422 <hr/> City WASHINGTON State DC Zip Code 20003 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB23.18568 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BARNEY <hr/> Mailing Address FRANK POST OFFICE BOX 260 <hr/> City NEWTONVILLE State MA Zip Code 02460 <hr/> Purpose of Disbursement CONTRIBUTION MA - C.D. # 04 Candidate Name BARNEY FRANK <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18573 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1666.67
<b>C.</b>	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT BARNEY <hr/> Mailing Address FRANK POST OFFICE BOX 260 <hr/> City NEWTONVILLE State MA Zip Code 02460 <hr/> Purpose of Disbursement CONTRIBUTION MA - C.D. # 04 Candidate Name BARNEY FRANK <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 04 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18574 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1666.67

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

**8333.34**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) <b>COMMITTEE TO ELECT BARNEY</b>	<b>Transaction ID:</b> SB23.18575
	Mailing Address <b>FRANK POST OFFICE BOX 260</b>	Date of Disbursement MM / DD / YYYY <b>05 / 12 / 2009</b>
	City <b>NEWTONVILLE</b> State <b>MA</b> Zip Code <b>02460</b>	Amount of Each Disbursement this Period <b>1666.66</b>
	Purpose of Disbursement CONTRIBUTION MA - C.D. # 04	Category/ Type
	Candidate Name <b>BARNEY FRANK</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>MA</b> District: <b>04</b>	

B.	Full Name (Last, First, Middle Initial) <b>COSTELLO FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.18601
	Mailing Address <b>POST OFFICE BOX 8250</b>	Date of Disbursement MM / DD / YYYY <b>05 / 26 / 2009</b>
	City <b>BELLVILLE</b> State <b>IL</b> Zip Code <b>62222</b>	Amount of Each Disbursement this Period <b>500.00</b>
	Purpose of Disbursement CONTRIBUTION IL - C.D. # 12	Category/ Type
	Candidate Name <b>JERRY COSTELLO</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>IL</b> District: <b>12</b>	

C.	Full Name (Last, First, Middle Initial) <b>COSTELLO FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.18602
	Mailing Address <b>POST OFFICE BOX 8250</b>	Date of Disbursement MM / DD / YYYY <b>05 / 26 / 2009</b>
	City <b>BELLVILLE</b> State <b>IL</b> Zip Code <b>62222</b>	Amount of Each Disbursement this Period <b>500.00</b>
	Purpose of Disbursement CONTRIBUTION IL - C.D. # 12	Category/ Type
	Candidate Name <b>JERRY COSTELLO</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>IL</b> District: <b>12</b>	

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

**2666.66**

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) DEMOCRATIC STATE CENTRAL COMM  Mailing Address 179 ALLYN STREET SUITE 301  City HARTFORD State CT Zip Code 06103  Purpose of Disbursement CONTRIBUTION Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	<b>Transaction ID:</b> SB23.18576 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9	Amount of Each Disbursement this Period 700.00
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064  Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.18577 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9	Amount of Each Disbursement this Period 2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064  Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER  Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.18578 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9	Amount of Each Disbursement this Period 2000.00

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

4700.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.18584 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period -2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.18585 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 3 / 2 0 0 9	Amount of Each Disbursement this Period -2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.18586 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 9	Amount of Each Disbursement this Period 1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>-3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18587 Date of Disbursement 05 / 14 / 2009	Amount of Each Disbursement this Period 2000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18588 Date of Disbursement 05 / 14 / 2009	Amount of Each Disbursement this Period 2000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER  Mailing Address POST OFFICE BOX 641751  City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18592 Date of Disbursement 05 / 15 / 2009	Amount of Each Disbursement this Period 2000.00

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

6000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF BARBARA BOXER Mailing Address POST OFFICE BOX 641751 City LOS ANGELES State CA Zip Code 90064 Purpose of Disbursement CONTRIBUTION US SENATE - CA Candidate Name BARBARA BOXER Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18593 Date of Disbursement 05 / 15 / 2009
	Amount of Each Disbursement this Period 2000.00
<b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF GLENN NYE Mailing Address POST OFFICE BOX 68444 City VIRGINIA BEACH State VA Zip Code 23471 Purpose of Disbursement CONTRIBUTION VA - C.D. # 02 Candidate Name GLENN NYE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18616 Date of Disbursement 05 / 29 / 2009
	Amount of Each Disbursement this Period 500.00
<b>C.</b> Full Name (Last, First, Middle Initial) FRIENDS OF GLENN NYE Mailing Address POST OFFICE BOX 68444 City VIRGINIA BEACH State VA Zip Code 23471 Purpose of Disbursement CONTRIBUTION VA - C.D. # 02 Candidate Name GLENN NYE Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 02 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18617 Date of Disbursement 05 / 29 / 2009
	Amount of Each Disbursement this Period 500.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>3000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF JIM LANGEVIN <hr/> Mailing Address 181-A KNIGHT STREET <hr/> City WARWICK State RI Zip Code 02886 <hr/> Purpose of Disbursement CONTRIBUTION RI - C.D. # 02 <hr/> Candidate Name JAMES LANGEVIN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18580 Date of Disbursement 05 / 12 / 2009	Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF JIM LANGEVIN <hr/> Mailing Address 181-A KNIGHT STREET <hr/> City WARWICK State RI Zip Code 02886 <hr/> Purpose of Disbursement CONTRIBUTION RI - C.D. # 02 <hr/> Candidate Name JAMES LANGEVIN <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 02 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18589 Date of Disbursement 05 / 14 / 2009	Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF PATRICK KENNEDY <hr/> Mailing Address NARRAGANSETT PARK PLAZA 687 BEVERAGE HILL AVENUE <hr/> City PAWTUCKET State RI Zip Code 02861 <hr/> Purpose of Disbursement CONTRIBUTION RI - C.D. # 01 <hr/> Candidate Name PATRICK J KENNEDY <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: RI District: 01 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18581 Date of Disbursement 05 / 12 / 2009	Amount of Each Disbursement this Period 5000.00

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF PATRICK KENNEDY</p> <p>Mailing Address NARRAGANSETT PARK PLAZA 687 BEVERAGE HILL AVENUE</p> <p>City PAWTUCKET State RI Zip Code 02861</p> <p>Purpose of Disbursement CONTRIBUTION RI - C.D. # 01</p> <p>Candidate Name PATRICK J KENNEDY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: RI District: 01</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.18590</p> <p>Date of Disbursement 05 / 14 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) GARAMENDI 2010</p> <p>Mailing Address 1121 L STREET SUITE 802</p> <p>City SACRAMENTO State CA Zip Code 95814</p> <p>Purpose of Disbursement CONTRIBUTION CA - C.D. # 10</p> <p>Candidate Name JOHN GARAMENDI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: CA District: 10</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-Primary</p>	<p><b>Transaction ID:</b> SB23.18595</p> <p>Date of Disbursement 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JACK CONWAY FOR SENATE</p> <p>Mailing Address POST OFFICE BOX 6168</p> <p>City LOUISVILLE State KY Zip Code 40206</p> <p>Purpose of Disbursement CONTRIBUTION US SENATE - KY</p> <p>Candidate Name JACK CONWAY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: KY District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.18597</p> <p>Date of Disbursement 05 / 15 / 2009</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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

12500.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>JACK CONWAY FOR SENATE</b>	<b>Transaction ID:</b> SB23.18603 Date of Disbursement 05 / 27 / 2009	
	Mailing Address POST OFFICE BOX 6168		
	City LOUISVILLE State KY Zip Code 40206	Amount of Each Disbursement this Period	-5000.00
	Purpose of Disbursement CONTRIBUTION US SENATE - KY		
	Candidate Name JACK CONWAY	Category/Type	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: KY District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>JOHN CARNEY FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.18605 Date of Disbursement 05 / 27 / 2009	
	Mailing Address POST OFFICE BOX 2162		
	City WILMINTON State DE Zip Code 19899	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement CONTRIBUTION DE - C.D. # AL		
	Candidate Name JOHN CARNEY	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: DE District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>JOHN CARNEY FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.18606 Date of Disbursement 05 / 27 / 2009	
	Mailing Address POST OFFICE BOX 2162		
	City WILMINTON State DE Zip Code 19899	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement CONTRIBUTION DE - C.D. # AL		
	Candidate Name JOHN CARNEY	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: DE District:	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	0.00
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) KOSMAS FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 1547 <hr/> City NEW SMYRNA BEACH State FL Zip Code 32170 <hr/> Purpose of Disbursement CONTRIBUTION FL - C.D. # 24 Candidate Name SUZANNE KOSMAS Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 24 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18571 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 1 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) LEADERSHIP FOR TODAY AND <hr/> Mailing Address TOMORROW 607 - 14TH STREET #800 <hr/> City WASHINGTON State DC Zip Code 20005 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18608 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) LEAHY FOR U.S. SENATOR <hr/> Mailing Address POST OFFICE BOX 1042 <hr/> City MONTPLIER State VT Zip Code 05601 <hr/> Purpose of Disbursement CONTRIBUTION US SENATE - VT Candidate Name PATRICK J LEAHY Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18610 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 7 / 2 0 0 9
	Amount of Each Disbursement this Period 2500.00
	Category/ Type
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty)

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

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

Mailing Address POST OFFICE BOX 6066

City CONCORD State CA Zip Code 95841

Purpose of Disbursement  
CONTRIBUTION CA - C.D. # 10

Candidate Name  
MARK DESAULNIER

Office Sought:  House  
 Senate  
 President

State: CA District: 10

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼  
Special-Primary

Transaction ID: SB23.18599

Date of Disbursement

05 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

Mailing Address 625 THIRD STREET NE  
SUITE 2

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
CONTRIBUTION CA - C.D. # 15

Candidate Name  
MIKE HONDA

Office Sought:  House  
 Senate  
 President

State: CA District: 15

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: SB23.18611

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

5000.00

Category/  
Type

**C.** Full Name (Last, First, Middle Initial)  
NATIONAL STONEWALL DEMOCRATS

Mailing Address 1325 MASSACHUSETTS AVENUE  
SUITE 700

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For: 2009  
 Primary  General  
 Other (specify) ▼  
Other

Transaction ID: SB23.18570

Date of Disbursement

05 / 06 / 2009

Amount of Each Disbursement this Period

1000.00

Category/  
Type

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

7000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) PALLONE FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 3176 <hr/> City LONG BRANCH State NJ Zip Code 07740 <hr/> Purpose of Disbursement CONTRIBUTION NJ - C.D. # 06 <hr/> Candidate Name FRANK PALLONE JR <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18582 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 2500.00
	Category/ Type
<b>B.</b> Full Name (Last, First, Middle Initial) PETERSON FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 265 <hr/> City DETROIT LAKES State MN Zip Code 56502 <hr/> Purpose of Disbursement CONTRIBUTION MN - C.D. # 07 <hr/> Candidate Name COLLIN PETERSON <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 07 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18583 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00
	Category/ Type
<b>C.</b> Full Name (Last, First, Middle Initial) SCHWARTZ FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 2232 <hr/> City JENKINTOWN State PA Zip Code 19046 <hr/> Purpose of Disbursement CONTRIBUTION PA - C.D. # 13 <hr/> Candidate Name ALLYSON SCHWARTZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13 <hr/> Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.18618 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
	Category/ Type

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

8500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) SCHWARTZ FOR CONGRESS	Transaction ID: SB23.18619 Date of Disbursement 05 / 29 / 2009
	Mailing Address POST OFFICE BOX 2232	Amount of Each Disbursement this Period 1000.00
	City JENKINTOWN State PA Zip Code 19046	
	Purpose of Disbursement CONTRIBUTION PA - C.D. # 13	Category/Type
	Candidate Name ALLYSON SCHWARTZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS	Transaction ID: SB23.18620 Date of Disbursement 05 / 29 / 2009
	Mailing Address POST OFFICE BOX 16	Amount of Each Disbursement this Period 1250.00
	City MEDIA State PA Zip Code 19063	
	Purpose of Disbursement CONTRIBUTION PA - C.D. # 07	Category/Type
	Candidate Name JOE SESTAK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) SESTAK FOR CONGRESS	Transaction ID: SB23.18621 Date of Disbursement 05 / 29 / 2009
	Mailing Address POST OFFICE BOX 16	Amount of Each Disbursement this Period 1250.00
	City MEDIA State PA Zip Code 19063	
	Purpose of Disbursement CONTRIBUTION PA - C.D. # 07	Category/Type
	Candidate Name JOE SESTAK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

3500.00

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

91200.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) ALBANO FOR THE 1ST DISTRICT</p> <p>Mailing Address POST OFFICE BOX 941</p> <p>City CAPE MAY COURTHOUS State NJ Zip Code 08210</p> <p>Purpose of Disbursement CONTRIBUTION ASSEMBLY - NJ</p> <p>Candidate Name NELSON ALBANO</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.18624 <b>Date of Disbursement</b> 05 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) AMERICANS FOR DEMOCRATIC</p> <p>Mailing Address ACTION 1625 K STREET N.W.</p> <p>City WASHINGTON State DC Zip Code 20006</p> <p>Purpose of Disbursement CONTRIBUTION</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.18625 <b>Date of Disbursement</b> 05 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 5040.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BARKER FOR SENATE</p> <p>Mailing Address POST OFFICE BOX 10527</p> <p>City ALEXANDRIA State VA Zip Code 22310</p> <p>Purpose of Disbursement CONTRIBUTION STATE SENATE - VA</p> <p>Candidate Name GEORGE BARKER</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District:</p> <p>Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.18627 <b>Date of Disbursement</b> 05 / 12 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6540.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT KEVIN ZINSK	Transaction ID: SB29.18629 Date of Disbursement
	Mailing Address 7 HIGHLAND VIEW ROAD	<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code CARNEGIE PA 15106	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION DISTRICT JUDGE - PA	<input type="text" value="1000.00"/>
	Candidate Name KEVIN ZINSKI	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District:	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MENDELSON FOR COUNCIL 2010	Transaction ID: SB29.18623 Date of Disbursement
	Mailing Address 888 - 16TH STREET NW SUITE 520	<input type="text" value="05"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code WASHINGTON DC 20006	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION CITY COUNCIL - DC	<input type="text" value="1000.00"/>
	Candidate Name PHIL MENDELSON	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DC District:	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) MOVING VIRGINIA FORWARD PAC	Transaction ID: SB29.18633 Date of Disbursement
	Mailing Address 1021 EAST CARY STREET SUITE 2150	<input type="text" value="05"/> <input type="text" value="29"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code RICHMOND VA 23219	Amount of Each Disbursement this Period
	Purpose of Disbursement INTL 2009	<input type="text" value="5000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MOVING VIRGINIA FORWARD PAC</b>	<b>Transaction ID:</b> SB29.18634 Date of Disbursement 05 / 29 / 2009	
	Mailing Address <b>1021 EAST CARY STREET SUITE 2150</b>		
	City <b>RICHMOND</b> State <b>VA</b> Zip Code <b>23219</b>	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement L400 2009		
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>VOCUS INC.</b>	<b>Transaction ID:</b> SB29.18630 Date of Disbursement 05 / 28 / 2009	
	Mailing Address <b>4296 FORBES BLVD</b>		
	City <b>LANHAM</b> State <b>MD</b> Zip Code <b>20706</b>	Amount of Each Disbursement this Period -29571.92	
	Purpose of Disbursement To correct descriptor re: Voucher P55482		
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>VOCUS INC.</b>	<b>Transaction ID:</b> SB29.18631 Date of Disbursement 05 / 28 / 2009	
	Mailing Address <b>4296 FORBES BLVD</b>		
	City <b>LANHAM</b> State <b>MD</b> Zip Code <b>20706</b>	Amount of Each Disbursement this Period 29571.92	
	Purpose of Disbursement To correct descriptor re: Voucher P55482		
	Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Category/ Type

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

5000.00

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

18540.00