

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

Office Use Only

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

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

ADDRESS (number and street)

8000 EAST JEFFERSON

☐Check if different  
than previously  
reported. (ACC)

DETROIT

MI

48214

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00002840

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)4. **TYPE OF REPORT**

(Choose One)

(a) Quarterly Reports:

☒April 15  
Quarterly Report(Q1)☐July 15  
Quarterly Report(Q2)☐October 15  
Quarterly Report(Q3)☐January 31  
Quarterly Report(YE)☐July 31 Mid-Year  
Report(Non-election  
Year Only) (MY)☐Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐

Feb 20 (M2)

☐

May 20 (M5)

☐

Aug 20 (M8)

☐Nov 20 (M11)  
(Non-Election  
Year Only)☐

Mar 20 (M3)

☐

Jun 20 (M6)

☐

Sep 20 (M9)

☐Dec 20 (M12)  
(Non-Election  
Year Only)☐

Apr 20 (M4)

☐

Jul 20 (M7)

☐

Oct 20 (M10)

☐

Jan 31 (YE)

(c) 12-Day  
**PRE**-Election  
Report for the:☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12G)

Election on

in the  
State of(d) 30-Day  
**Post**-Election  
Report for the:☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2006

through

03

31

2006

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Elizabeth Bunn

Signature of Treasurer

Electronically Filed by Elizabeth Bunn

Date

02

16

2007

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

Office Use Only							
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**FEC FORM 3X**  
(Rev. 02/2003)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

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

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2006</span>		11201508.24
(b) Cash on Hand at Beginning of Reporting Period .....	11201508.24	
(c) Total Receipts (from Line 19) .....	1984860.79	1984860.79
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	13186369.03	13186369.03
7. Total Disbursements (from Line 31) .....	987441.73	987441.73
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	12198927.30	12198927.30
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

## For further information contact:

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

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

# **DETAILED SUMMARY PAGE OF RECEIPTS**

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

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

To:

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	27581.00	27581.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	1939816.38	1939816.38
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡	1967397.38	1967397.38
(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) ..... ➡	1967397.38	1967397.38
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	17463.41	17463.41
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)) .....	1984860.79	1984860.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	1984860.79	1984860.79

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. DISBURSEMENTS		COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:			
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		0.00	0.00
(i) Federal Share.....			
(ii) Non-Federal Share.....		0.00	0.00
(b) Other Federal Operating Expenditures.....		280023.17	280023.17
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....		280023.17	280023.17
22. Transfers to Affiliated/Other Party Committees.....		0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....		436000.00	436000.00
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 .....		986.50	986.50
(b) Political Party Committees .....		0.00	0.00
(c) Other Political Committees (such as PACs) .....		0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....		986.50	986.50
29. Other Disbursements.....		270432.06	270432.06
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))..		987441.73	987441.73
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....		987441.73	987441.73

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	1967397.38	1967397.38
34. Total Contribution Refunds (from Line 28(d)) .....	986.50	986.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	1966410.88	1966410.88
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	280023.17	280023.17
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	280023.17	280023.17

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

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

FOR LINE NUMBER: PAGE 6 / 156

(check only one)

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

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

NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
RONALD ACHEY  
Mailing Address 1239 MAPLE ST

City State Zip Code  
BETHLEHEM PA 18018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63093

Amount of Each Receipt this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
RONALD ACHEY  
Mailing Address 1239 MAPLE ST

City State Zip Code  
BETHLEHEM PA 18018

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11A1.63195

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
DENIESE ALEJANDRO  
Mailing Address 196 N. CLAREMONT AVENUE

City State Zip Code  
SAN JOSE CA 95127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW UNITED MOTORS MFG

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

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

Transaction ID: SA11A1.63176

Amount of Each Receipt this Period

500.00

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

1100.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) CHARLES ALFRED		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 809 BARRETT AVENUE		<b>Transaction ID:</b> SA11A1.63081 Amount of Each Receipt this Period 300.00
City ARNOLD	State MD	
Zip Code 21012		
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) RON ALMOND		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6
Mailing Address 522 MCFARLAND ROAD		<b>Transaction ID:</b> SA11A1.63108 Amount of Each Receipt this Period 300.00
City LATROBE	State PA	
Zip Code 15650		
FEC ID number of contributing federal political committee. C		
Name of Employer NEW CASTLE FOUNDRY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) ALICIA AMADOR		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 401 SCRUB OAK CT		<b>Transaction ID:</b> SA11A1.63073 Amount of Each Receipt this Period 125.00
City FORT WORTH	State TX	
Zip Code 76108-4501		
FEC ID number of contributing federal political committee. C		
Name of Employer TEXTRON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

725.00

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

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

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

FOR LINE NUMBER: PAGE 8 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JEFFREY H ARMSTRONG

Mailing Address 1011 HORIZON WAY

City State Zip Code  
 MARTINSBURG WV 25401-1029

FEC ID number of contributing federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATIONOccupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.63095

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. JEFFREY H ARMSTRONG

Mailing Address 1011 HORIZON WAY

City State Zip Code  
 MARTINSBURG WV 25401-1029

FEC ID number of contributing federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATIONOccupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63153

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

C. RONALD C BAILEY

Mailing Address 2316 SANFORD ST

City State Zip Code  
 MUSKEGON HTS MI 49444-1437

FEC ID number of contributing federal political committee.

C

Name of Employer  
HOWMET CORPOccupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63245

Amount of Each Receipt this Period

100.00

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

401.00

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



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** MARCIA BALLARD

Mailing Address 63041 BORGERT RD

City

STURGIS

State

MI

Zip Code

49091-9360

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN AXLE & MANUFACTU-  
RING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63135

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

**B.** MICHAEL C BELSITO

Mailing Address 3641 ALLIUM DR

City

HOLT

State

MI

Zip Code

48842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 652

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11A1.63267

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

**C.** MICHAEL C BELSITO

Mailing Address 3641 ALLIUM DR

City

HOLT

State

MI

Zip Code

48842

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 652

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63268

Amount of Each Receipt this Period

25.00

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

570.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) MICHAEL BIEBER		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 4 / 2 0 0 6
Mailing Address 582 PINESPAR DRIVE SW		<b>Transaction ID:</b> SA11A1.62973 Amount of Each Receipt this Period 400.00
City BYRON CENTER	State MI	
Zip Code 49315		
FEC ID number of contributing federal political committee. C		
Name of Employer DELPHI CORP	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 420.00	

<b>B.</b> Full Name (Last, First, Middle Initial) RICHARD K BLOME		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 100 RICH DR		<b>Transaction ID:</b> SA11A1.62933 Amount of Each Receipt this Period 210.00
City GURLEY	State AL	
Zip Code 35748-9201		
FEC ID number of contributing federal political committee. C		
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b> Full Name (Last, First, Middle Initial) DANNY G BOWLING		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6
Mailing Address 118 S MUNCIE ST		<b>Transaction ID:</b> SA11A1.63167 Amount of Each Receipt this Period 300.00
City CAREY	State OH	
Zip Code 43316-1120		
FEC ID number of contributing federal political committee. C		
Name of Employer CUMMINS ENGINE CO	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

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

910.00

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ARNOLD BRADFORD

Mailing Address 744 W CEDAR ST

City

HURST

State

TX

Zip Code

76053-5522

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.63025

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. DARRYL BRAGG

Mailing Address 5076 RAYMOND AVE

City

BURTON

State

MI

Zip Code

48509-1932

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 9699

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63218

Amount of Each Receipt this Period

40.00

Full Name (Last, First, Middle Initial)

C. LO D BUI

Mailing Address 5445 W HIDDEN LAKE DR

City

EAST LANSING

State

MI

Zip Code

48823-7251

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

253.00

Date of Receipt

M M / D D / Y Y Y Y  
0 2 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63123

Amount of Each Receipt this Period

250.00

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

365.00

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

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

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

FOR LINE NUMBER: PAGE 12 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) LO D BUI Mailing Address 5445 W HIDDEN LAKE DR City EAST LANSING State MI Zip Code 48823-7251 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 254.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63227 Amount of Each Receipt this Period 1.00
<b>B.</b> Full Name (Last, First, Middle Initial) JAMES H BUTLER Mailing Address 1790 MURDOCK RD City MARIETTA State GA Zip Code 30062-4829 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63178 Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) ROBERT CAMARA Mailing Address 83 BARBERRY LANE ALT DIST City O FALLON State MO Zip Code 63366 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 235.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63217 Amount of Each Receipt this Period 75.00

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

376.00

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

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

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

FOR LINE NUMBER: PAGE 13 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) PAUL J CARR		Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6
Mailing Address 2755 ELIZABETH LANE		<b>Transaction ID:</b> SA11A1.63166
City WEST BLOOMFIELD	State MI	Zip Code 48324-2186
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 248.00
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b> Full Name (Last, First, Middle Initial) PAUL J CARR		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 4 / 2 0 0 6
Mailing Address 2755 ELIZABETH LANE		<b>Transaction ID:</b> SA11A1.62996
City WEST BLOOMFIELD	State MI	Zip Code 48324-2186
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 9.00
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 284.00	

<b>C.</b> Full Name (Last, First, Middle Initial) MICHAEL CAVANAUGH		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 26330 JEFFERSON AVENUE		<b>Transaction ID:</b> SA11A1.63161
City ST CLAIR SHORES	State MI	Zip Code 48081-2429
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

557.00

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

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

FOR LINE NUMBER: PAGE 14 / 156

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID CHADWELL Mailing Address 4351 POST RAIL LN City FRANKLIN State OH Zip Code 45005-4950 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer MILLER BREWING Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 225.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 2 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.62993 Amount of Each Receipt this Period 50.00
<b>B.</b> Full Name (Last, First, Middle Initial) MEL COLEMAN Mailing Address 2900 BASCOM CIR City LANSING State MI Zip Code 48912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UAW LOCAL UNION 652 Occupation LOCAL UNION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 525.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63246 Amount of Each Receipt this Period 525.00
<b>C.</b> Full Name (Last, First, Middle Initial) MEL COLEMAN Mailing Address 2900 BASCOM CIR City LANSING State MI Zip Code 48912 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UAW LOCAL UNION 652 Occupation LOCAL UNION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 550.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63262 Amount of Each Receipt this Period 25.00

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

600.00

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

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

FOR LINE NUMBER: PAGE 15 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DANNY R CROSS Mailing Address 38 BRIDGEVIEW DR. City ELKTON State MD Zip Code 21921 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63122 Amount of Each Receipt this Period 300.00
Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 320.00		
<b>B.</b> Full Name (Last, First, Middle Initial) VICTOR CZERNIAK Mailing Address 164 SOUTHRIDGE RD City ALVORD State TX Zip Code 76225-4061 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.62960 Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		
<b>C.</b> Full Name (Last, First, Middle Initial) JACKIE DALE Mailing Address 4640 N FM 51 City WEATHERFORD State TX Zip Code 76085 FEC ID number of contributing federal political committee. <b>C</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.62978 Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		450.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 16 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DON DAVIS			Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6	
Mailing Address 84 ST ANNES PLACE			<b>Transaction ID:</b> SA11A1.63197	
City State Zip Code PAWLEYS ISLAND SC 29585			Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation RETIRED		Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>B.</b> Full Name (Last, First, Middle Initial) GLEND A J DEERING			Date of Receipt M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 6	
Mailing Address PO BOX 355			<b>Transaction ID:</b> SA11A1.62951	
City State Zip Code MARLETTE MI 48453-0355			Amount of Each Receipt this Period 438.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation LOCAL UNION OFFICER		Aggregate Year-to-Date ▼ 458.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				
<b>C.</b> Full Name (Last, First, Middle Initial) GLEND A J DEERING			Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 0 6	
Mailing Address PO BOX 355			<b>Transaction ID:</b> SA11A1.63175	
City State Zip Code MARLETTE MI 48453-0355			Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C				
Name of Employer Occupation LOCAL UNION OFFICER		Aggregate Year-to-Date ▼ 478.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼				

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

758.00

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



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

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

FOR LINE NUMBER: PAGE 17 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

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

GLEND A J DEERING

Mailing Address PO BOX 355

City State Zip Code  
 MARLETTE MI 48453-0355

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL 9699

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

518.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63202

Amount of Each Receipt this Period

40.00

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

JOHN M DEFRANCISCO

Mailing Address 506 DELAWARE ST

City State Zip Code  
 ESSINGTON PA 19029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOEING

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 2 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.63206

Amount of Each Receipt this Period

300.00

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

DENNIS DEWYER

Mailing Address 47 ROSEMARY AVE

City State Zip Code  
 BUFFALO NY 14216-1614

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN AXLE & MANUFACTURING

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

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

Transaction ID: SA11A1.63139

Amount of Each Receipt this Period

140.00

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

480.00

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

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

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

FOR LINE NUMBER: PAGE 18 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** JAMES J DOOLITTLE

Mailing Address 4821 S MINER RD

City State Zip Code  
 CARSON CITY MI 48811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UAW LOCAL UNION 652

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

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

Transaction ID: SA11A1.63257

Amount of Each Receipt this Period

525.00

Full Name (Last, First, Middle Initial)

**B.** JAMES J DOOLITTLE

Mailing Address 4821 S MINER RD

City State Zip Code  
 CARSON CITY MI 48811

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UAW LOCAL UNION 652

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63256

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**C.** DON EARP

Mailing Address PO BOX 276

City State Zip Code  
 HURST TX 76053-0276

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXTRON

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.63209

Amount of Each Receipt this Period

75.00

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

625.00

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

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

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

FOR LINE NUMBER: PAGE 19 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
 RODERICK EASHOO  
 Mailing Address 10463 TWIN LAKES DR

City State Zip Code  
 OTISVILLE MI 48463-9756

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 GENERAL MOTORS CORPORATION

Occupation  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

640.00

Date of Receipt

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

Transaction ID: SA11A1.63089

Amount of Each Receipt this Period

600.00

**B.** Full Name (Last, First, Middle Initial)  
 RODERICK EASHOO  
 Mailing Address 10463 TWIN LAKES DR

City State Zip Code  
 OTISVILLE MI 48463-9756

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 GENERAL MOTORS CORPORATION

Occupation  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

650.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63146

Amount of Each Receipt this Period

10.00

**C.** Full Name (Last, First, Middle Initial)  
 JEFFREY A ELGERT  
 Mailing Address 37895 CIRCLE DR

City State Zip Code  
 HARRISON TOWNSHIP MI 48045-2810

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
 UAW LOCAL UNION 412

Occupation  
 LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

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

Transaction ID: SA11A1.63085

Amount of Each Receipt this Period

190.00

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

800.00

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

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

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

FOR LINE NUMBER: PAGE 20 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JEFFREY A ELGERT

Mailing Address 37895 CIRCLE DR

City State Zip Code  
HARRISON TOWNSHIP MI 48045-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 412

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

217.00

Date of Receipt

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

Transaction ID: SA11A1.62930

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

B. JEFFREY A ELGERT

Mailing Address 37895 CIRCLE DR

City State Zip Code  
HARRISON TOWNSHIP MI 48045-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 412

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

226.00

Date of Receipt

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

Transaction ID: SA11A1.63086

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

C. JEFFREY A ELGERT

Mailing Address 37895 CIRCLE DR

City State Zip Code  
HARRISON TOWNSHIP MI 48045-2810

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 412

Occupation  
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63087

Amount of Each Receipt this Period

9.00

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

27.00

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

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

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

FOR LINE NUMBER: PAGE 21 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
DANIEL L FAIRBANKS

Mailing Address 9526 ASH ST

City State Zip Code  
OVERLAND PARK KS 66207-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

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

Transaction ID: SA11A1.63207

Amount of Each Receipt this Period

315.00

**B.** Full Name (Last, First, Middle Initial)  
DANIEL L FAIRBANKS

Mailing Address 9526 ASH ST

City State Zip Code  
OVERLAND PARK KS 66207-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63045

Amount of Each Receipt this Period

105.00

**C.** Full Name (Last, First, Middle Initial)  
DANIEL L FAIRBANKS

Mailing Address 9526 ASH ST

City State Zip Code  
OVERLAND PARK KS 66207-3225

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

545.00

Date of Receipt

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

Transaction ID: SA11A1.63208

Amount of Each Receipt this Period

105.00

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

525.00

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

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

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

FOR LINE NUMBER: PAGE 22 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) HECTOR FLORES		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 0 / 2 0 0 6
Mailing Address 835 HUNKER RD		<b>Transaction ID:</b> SA11A1.63169
City TOLEDO	State OH	Zip Code 43605-1118
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) JAMES W FOSTER		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6
Mailing Address 7300 MURKINS RD		<b>Transaction ID:</b> SA11A1.62970
City KANSAS CITY	State MO	Zip Code 64133-7002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 210.00
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b> Full Name (Last, First, Middle Initial) JAMES W FOSTER		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6
Mailing Address 7300 MURKINS RD		<b>Transaction ID:</b> SA11A1.63215
City KANSAS CITY	State MO	Zip Code 64133-7002
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

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

580.00

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

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

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

FOR LINE NUMBER: PAGE 23 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DENNIS FULTS		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 7300 GILLIS JOHNSON ST		<b>Transaction ID:</b> SA11A1.63080
City FORT WORTH	State TX	Zip Code 76179-3326
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b> Full Name (Last, First, Middle Initial) FLORRINE G GARMON		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 3 / 2 0 0 6
Mailing Address 8196 FOXCHASE CIRCLE		<b>Transaction ID:</b> SA11A1.63223
City INDIANAPOLIS	State IN	Zip Code 46256
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer INDIANA (STATE OF)	Occupation CLERICAL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b> Full Name (Last, First, Middle Initial) SANDRA GATSON		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6
Mailing Address 1522 LAKECREST ST		<b>Transaction ID:</b> SA11A1.62997
City GRAND PRAIRIE	State TX	Zip Code 75051-3447
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

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

675.00

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

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

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

FOR LINE NUMBER: PAGE 24 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City State Zip Code  
 GRAND PRAIRIE TX 75051-3447

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63022

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

**B.** RICHARD K GESKE

Mailing Address 6020 S ELAINE AVE

City State Zip Code  
 CUDAHY WI 53110-2915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.63138

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

**C.** RICHARD K GESKE

Mailing Address 6020 S ELAINE AVE

City State Zip Code  
 CUDAHY WI 53110-2915

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63052

Amount of Each Receipt this Period

50.00

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

225.00

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



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

FOR LINE NUMBER: PAGE 25 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) RICHARD GONZALEZ Mailing Address 6409 REDSTONE DR City ARLINGTON State TX Zip Code 76001-5489 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63151 Amount of Each Receipt this Period 75.00
<b>B.</b> Full Name (Last, First, Middle Initial) DONALD GRUNDY Mailing Address 3629 RACQUET CLUB DR City GRAND PRAIRIE State TX Zip Code 75052-6108 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 275.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63164 Amount of Each Receipt this Period 75.00
<b>C.</b> Full Name (Last, First, Middle Initial) KENNETH J GWIZDALA Mailing Address 927 N DEWITT ST City BAY CITY State MI Zip Code 48706-3679 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UAW LOCAL UNION 2275 Occupation LOCAL UNION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63260 Amount of Each Receipt this Period 300.00

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

450.00

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

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

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

FOR LINE NUMBER: PAGE 26 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID R HART Mailing Address 12020 N COUNTY RD 825 W City State Zip Code GASTON IN 47342 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 1 / 3 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63232 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) RONALD HENDRIX Mailing Address 1022 JUSTUS DRIVE City State Zip Code JOHNSON CITY TN 37604 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer REXROTH CORP. Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63191 Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) RONALD A HENRY Mailing Address 840 SHIRLEY BLVD City State Zip Code MUSKEGON MI 49442-3837 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer LENAWE STAMPING Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 215.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 1 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63261 Amount of Each Receipt this Period 15.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		615.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

FOR LINE NUMBER: PAGE 27 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) GLENN HOLLAND		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 3 / 2 0 0 6
Mailing Address 11308 BROUGHAM		
City	State	Zip Code
FORT WAYNE	IN	46845
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.63181
Name of Employer AM GENERAL		Amount of Each Receipt this Period 300.00
Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b> Full Name (Last, First, Middle Initial) TERRI HOLLINGSWORTH		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 2710 GOLDEN CREEK LN # 408		
City	State	Zip Code
ARLINGTON	TX	76006-3528
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.63155
Name of Employer TEXTRON		Amount of Each Receipt this Period 75.00
Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>C.</b> Full Name (Last, First, Middle Initial) VELMA HOLT		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO BOX 276		
City	State	Zip Code
HURST	TX	76053-0276
FEC ID number of contributing federal political committee.		Transaction ID: SA11A1.63007
Name of Employer TEXTRON		Amount of Each Receipt this Period 50.00
Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00	

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

425.00

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

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

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

FOR LINE NUMBER: PAGE 28 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID HOUSE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 4814 RIDGELINE DR		<b>Transaction ID:</b> SA11A1.62953
City ARLINGTON	State TX	Zip Code 76017-1113
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

<b>B.</b> Full Name (Last, First, Middle Initial) TAMMY HOUSE		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address PO BOX 276		<b>Transaction ID:</b> SA11A1.63099
City HURST	State TX	Zip Code 76053-0276
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b> Full Name (Last, First, Middle Initial) JANSING HURST		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6
Mailing Address 1621 OAK CREEK LN APT D		<b>Transaction ID:</b> SA11A1.63125
City BEDFORD	State TX	Zip Code 76022-4908
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 75.00
Name of Employer TEXTRON	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00	

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

225.00

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

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

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

FOR LINE NUMBER: PAGE 29 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** GEORGE Y JACOB

Mailing Address 4980 SOUTH HURON RIVER DR.

City State Zip Code  
 FLATROCK MI 48134

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.63056

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

**B.** GEORGE Y JACOB

Mailing Address 4980 SOUTH HURON RIVER DR.

City State Zip Code  
 FLATROCK MI 48134

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63188

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**C.** DENNIS W JANOWICZ

Mailing Address 24413 STAR VALLEY

City State Zip Code  
 ST CLAIR SHORES MI 48080

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

215.00

Date of Receipt

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

Transaction ID: SA11A1.63171

Amount of Each Receipt this Period

200.00

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

415.00

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

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

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

FOR LINE NUMBER: PAGE 30 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** DENNIS W JANOWICZ

Mailing Address 24413 STAR VALLEY

City State Zip Code  
 ST CLAIR SHORES MI 48080

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63118

Amount of Each Receipt this Period

5.00

Full Name (Last, First, Middle Initial)

**B.** KAREN L JEAN

Mailing Address 505 DAYTON AVE

City State Zip Code  
 KALAMAZOO MI 49048-2106

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63264

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** DONALD JENKINS

Mailing Address 115 PARK PLACE DRIVE

City State Zip Code  
 COVINGTON GA 30016

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63069

Amount of Each Receipt this Period

300.00

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

605.00

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

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

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

FOR LINE NUMBER: PAGE 31 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** TERESA KRISKO

Mailing Address 98 CAUSEWAY DR

City State Zip Code  
 ST MARYS OH 45885

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL DYNAMICS CORP

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63144

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** KATHERINE KULAKOWSKI

Mailing Address 2 MANDOLIN CT

City State Zip Code  
 NEWARK DE 19702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63158

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** FRANCIS LEMAY

Mailing Address 104 SOUTH MURPHY AVENUE

City State Zip Code  
 BRAZIL IN 47834-8296

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
INDIANA (STATE OF)

Occupation  
CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63084

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

FOR LINE NUMBER: PAGE 32 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) GARY LIVINGSTON Mailing Address 1717 BENT TREE CT City State Zip Code GRANBURY TX 76049-8086 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation TEXTRON FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>225.00</div>		Date of Receipt <div>M M / D D / Y Y Y Y Y</div> <div>0 3 / 2 0 / 2 0 0 6</div> Transaction ID: SA11A1.63124 Amount of Each Receipt this Period <div>75.00</div>
<b>B.</b> Full Name (Last, First, Middle Initial) RANDY A MARTIN Mailing Address 3205 ASBURY CT. City State Zip Code KOKOMO IN 46902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation DAIMLERCHRYSLER FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>230.00</div>		Date of Receipt <div>M M / D D / Y Y Y Y Y</div> <div>0 2 / 0 7 / 2 0 0 6</div> Transaction ID: SA11A1.62995 Amount of Each Receipt this Period <div>30.00</div>
<b>C.</b> Full Name (Last, First, Middle Initial) RANDY A MARTIN Mailing Address 3205 ASBURY CT. City State Zip Code KOKOMO IN 46902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation DAIMLERCHRYSLER FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <div>240.00</div>		Date of Receipt <div>M M / D D / Y Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 0 6</div> Transaction ID: SA11A1.63141 Amount of Each Receipt this Period <div>10.00</div>

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

**115.00**

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



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

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

FOR LINE NUMBER: PAGE 33 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) PAUL MARTINEZ Mailing Address 6317 N RIDGE RD City State Zip Code FORT WORTH TX 76135-1347 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation TEXTRON FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 204.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63212 Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) PAUL MARTINEZ Mailing Address 6317 N RIDGE RD City State Zip Code FORT WORTH TX 76135-1347 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation TEXTRON FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 281.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.62992 Amount of Each Receipt this Period 77.00
<b>C.</b> Full Name (Last, First, Middle Initial) REBECCA MARTINEZ Mailing Address 2248 S QUAIL HOLLOW RD City State Zip Code BYERS CO 80103-9431 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation DAIMLERCHRYSLER FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63142 Amount of Each Receipt this Period 100.00

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

277.00

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

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

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

FOR LINE NUMBER: PAGE 34 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
PERRY L MASON  
Mailing Address 580 TURNBERRY PL # B

City State Zip Code  
ST PETERS MO 63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

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

Transaction ID: SA11A1.63148

Amount of Each Receipt this Period

600.00

**B.** Full Name (Last, First, Middle Initial)  
PERRY L MASON  
Mailing Address 580 TURNBERRY PL # B

City State Zip Code  
ST PETERS MO 63376

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

800.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.62936

Amount of Each Receipt this Period

200.00

**C.** Full Name (Last, First, Middle Initial)  
PAT MCCANN  
Mailing Address 4617 PENDLETON

City State Zip Code  
PEORIA IL 61615

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CATERPILLAR

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.62964

Amount of Each Receipt this Period

240.00

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

1040.00

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

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

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

FOR LINE NUMBER: PAGE 35 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

BEVERLY R MICHENER

Mailing Address 2711 DOROTHY LANE AVE

City

SPRINGFIELD

State

OH

Zip Code

45505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAVISTAR INTERNATIONAL CO-  
RP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63115

Amount of Each Receipt this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

BEVERLY R MICHENER

Mailing Address 2711 DOROTHY LANE AVE

City

SPRINGFIELD

State

OH

Zip Code

45505

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NAVISTAR INTERNATIONAL CO-  
RP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.63065

Amount of Each Receipt this Period

25.00

**C.**

Full Name (Last, First, Middle Initial)

JERRY MILLER

Mailing Address PO BOX 276

City

HURST

State

TX

Zip Code

76053-0276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.63042

Amount of Each Receipt this Period

75.00

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

400.00

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

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

FOR LINE NUMBER: PAGE 36 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) CONRAD C MORRISON Mailing Address PO BOX 79 City State Zip Code SHAFTSBURG MI 48882-0079 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 325.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63198 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) CONRAD C MORRISON Mailing Address PO BOX 79 City State Zip Code SHAFTSBURG MI 48882-0079 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63152 Amount of Each Receipt this Period 5.00
<b>C.</b> Full Name (Last, First, Middle Initial) DAVID J MYERS Mailing Address 200 WOODDALE AVE City State Zip Code NEW CASTLE DE 19720-4736 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 303.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63204 Amount of Each Receipt this Period 300.00
<b>SUBTOTAL</b> of Receipts This Page (optional) ..... ▶		605.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶		

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

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

FOR LINE NUMBER: PAGE 37 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) DAVID J MYERS Mailing Address 200 WOODDALE AVE City State Zip Code NEW CASTLE DE 19720-4736 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 304.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63129 Amount of Each Receipt this Period 1.00
<b>B.</b> Full Name (Last, First, Middle Initial) GEORGE NALEVANKO Mailing Address 121 BEAVER RUN ROAD City State Zip Code GREENSBURG PA 15601 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation NEW CASTLE FOUNDRY FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63003 Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) DOROTHY NEWMAN Mailing Address 1224 40TH ST. SW City State Zip Code WYOMING MI 49509-4302 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63104 Amount of Each Receipt this Period 20.00

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

**321.00**

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
CRAIG A NOTHNAGEL

Mailing Address 4202 PINGREE RD

City State Zip Code  
HOWELL MI 48843-9657

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63224

Amount of Each Receipt this Period

20.00

**B.** Full Name (Last, First, Middle Initial)  
DENNIS PAWLIK

Mailing Address 3 SHADYSIDE LN

City State Zip Code  
LANCASTER NY 14086-1157

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
AMERICAN AXLE & MANUFACTURING

Occupation  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.62938

Amount of Each Receipt this Period

300.00

**C.** Full Name (Last, First, Middle Initial)  
CALVANITA PEALS

Mailing Address 38 E NEWPORT AVE

City State Zip Code  
PONTIAC MI 48340-1253

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

246.00

Date of Receipt

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

Transaction ID: SA11A1.63251

Amount of Each Receipt this Period

242.00

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

562.00

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

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

Use separate schedule(s)  
or each category of the  
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FOR LINE NUMBER: PAGE 39 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) CALVANITA PEALS Mailing Address 38 E NEWPORT AVE City PONTIAC State MI Zip Code 48340-1253 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 247.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63266 Amount of Each Receipt this Period 1.00
<b>B.</b> Full Name (Last, First, Middle Initial) DAVID M PETERSON Mailing Address 8107 W 80TH ST City OVERLAND PARK State KS Zip Code 66204-3419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 210.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63216 Amount of Each Receipt this Period 210.00
<b>C.</b> Full Name (Last, First, Middle Initial) DAVID M PETERSON Mailing Address 8107 W 80TH ST City OVERLAND PARK State KS Zip Code 66204-3419 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 280.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63001 Amount of Each Receipt this Period 70.00

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

281.00

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

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

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

FOR LINE NUMBER: PAGE 40 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) KIMBERLY PICKARD Mailing Address 2318 BOLLMAN DR City LANSING State MI Zip Code 48917-1311 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer BOC LANSING CAR ASSEMBLY Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 270.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63258 Amount of Each Receipt this Period 250.00
<b>B.</b> Full Name (Last, First, Middle Initial) DEAN POGGIALI Mailing Address 16181 ESKEST ST City LANSING State MI Zip Code 48906-1902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UAW LOCAL UNION 724 Occupation LOCAL UNION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63170 Amount of Each Receipt this Period 60.00
<b>C.</b> Full Name (Last, First, Middle Initial) DEAN POGGIALI Mailing Address 16181 ESKEST ST City LANSING State MI Zip Code 48906-1902 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer UAW LOCAL UNION 724 Occupation LOCAL UNION OFFICER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00			Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63060 Amount of Each Receipt this Period 10.00

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

**320.00**

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



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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.**

Full Name (Last, First, Middle Initial)

DEAN POGGIALI

Mailing Address 16181 ESKEST ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UAW LOCAL UNION 724

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.62934

Amount of Each Receipt this Period

60.00

**B.**

Full Name (Last, First, Middle Initial)

BRADLEY POPE

Mailing Address 5250 ALEXANDER ROAD

City

DUBLIN

State

VA

Zip Code

24084

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
VOLVO TRUCKS

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63046

Amount of Each Receipt this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

C REDWINE

Mailing Address PO BOX 276

City

HURST

State

TX

Zip Code

76053-0276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.63131

Amount of Each Receipt this Period

75.00

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

435.00

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

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

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

FOR LINE NUMBER: PAGE 42 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

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

HAROLD REEVES

Mailing Address 387 MCKINLEY AVE

City State Zip Code  
 BUFFALO NY 14221-7137

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
ERIE COMMUNITY COLLEGE

Occupation  
CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.00

Date of Receipt

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

Transaction ID: SA11A1.63132

Amount of Each Receipt this Period

212.00

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

EARL ROBERTS

Mailing Address 3274 OLD JUSTIN RD

City State Zip Code  
 ARGYLE TX 76226-4469

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXTRON

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.63033

Amount of Each Receipt this Period

75.00

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

RUDY RODRIGUEZ

Mailing Address 1850 S INTERSTATE 35W

City State Zip Code  
 BURLESON TX 76028

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXTRON

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.63226

Amount of Each Receipt this Period

75.00

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

362.00

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

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

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

FOR LINE NUMBER: PAGE 43 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

**A.** Full Name (Last, First, Middle Initial)  
FRED ROYAL, JR.  
Mailing Address 5705 W NASH ST

City State Zip Code  
MILWAUKEE WI 53216-2858

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

235.00

Date of Receipt

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

Transaction ID: SA11A1.63136

Amount of Each Receipt this Period

135.00

**B.** Full Name (Last, First, Middle Initial)  
FRED ROYAL, JR.  
Mailing Address 5705 W NASH ST

City State Zip Code  
MILWAUKEE WI 53216-2858

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.62924

Amount of Each Receipt this Period

45.00

**C.** Full Name (Last, First, Middle Initial)  
BAILEY J RUSSELL  
Mailing Address 35 B NORTH EAST ISLES

City State Zip Code  
NORTH EAST MD 21901

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 5 / 2 0 0 6

Transaction ID: SA11A1.63165

Amount of Each Receipt this Period

300.00

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

480.00

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

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

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

FOR LINE NUMBER: PAGE 44 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** PAUL SANDERS

Mailing Address 28564 EVERETT ST

City

SOUTHFIELD

State

MI

Zip Code

48076-3090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63126

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** PAUL SANDERS

Mailing Address 28564 EVERETT ST

City

SOUTHFIELD

State

MI

Zip Code

48076-3090

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63011

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**C.** KELLY SANTIMAN

Mailing Address 1060 ROGERS LANE

City

LEBANON

State

TN

Zip Code

37087

FEC ID number of contributing  
federal political committee.

C

Name of Employer

GENERAL MOTORS

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63172

Amount of Each Receipt this Period

300.00

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

700.00

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

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

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

FOR LINE NUMBER: PAGE 45 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ARTHUR SAUCEDO

Mailing Address 6000 ASH FLAT DR

City

FORT WORTH

State

TX

Zip Code

76131-2029

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.63234

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. DANIEL P SHANAHAN

Mailing Address 1457 DANGELO DR

City

NORTH TONAWANDA

State

NY

Zip Code

14120-3071

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.63092

Amount of Each Receipt this Period

65.00

Full Name (Last, First, Middle Initial)

C. ROBERT SIMMONS

Mailing Address 4101 W ARKANSAS LN

City

ARLINGTON

State

TX

Zip Code

76016-1496

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐

Primary

☐

General

☐

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63051

Amount of Each Receipt this Period

275.00

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

415.00

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

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

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

FOR LINE NUMBER: PAGE 46 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** TERRY SKOGSBERG

Mailing Address 6275 THORNCREST DR

City State Zip Code  
 ROCKFORD IL 61109-4575

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
SUNDSTRAND CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63027

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** THOMAS R SMITH

Mailing Address 13-D-4 CAPANO DRIVE

City State Zip Code  
 NEWARK DE 19702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

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

Transaction ID: SA11A1.62935

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** THOMAS R SMITH

Mailing Address 13-D-4 CAPANO DRIVE

City State Zip Code  
 NEWARK DE 19702

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63194

Amount of Each Receipt this Period

1.00

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

601.00

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

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

FOR LINE NUMBER: PAGE 47 / 156

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) MICHELLE SNYDER Mailing Address 1348 NORWOOD DR City State Zip Code HURST TX 76053-4057 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation TEXTRON FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 6 Transaction ID: SA11A1.62981 Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) DONALD L SOBAS Mailing Address 210 MERRIMAN RD City State Zip Code GARDEN CITY MI 48135-1300 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 229.00		Date of Receipt M M / D D / Y Y Y Y 0 2 / 0 8 / 2 0 0 6 Transaction ID: SA11A1.62941 Amount of Each Receipt this Period 229.00
<b>C.</b> Full Name (Last, First, Middle Initial) DONALD L SOBAS Mailing Address 210 MERRIMAN RD City State Zip Code GARDEN CITY MI 48135-1300 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 238.00		Date of Receipt M M / D D / Y Y Y Y 0 3 / 2 9 / 2 0 0 6 Transaction ID: SA11A1.63221 Amount of Each Receipt this Period 9.00

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

338.00

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

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

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

FOR LINE NUMBER: PAGE 48 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) CATHYANN STAGNER Mailing Address 9814 ROCK SPRINGS RD City WEST VALLEY State NY Zip Code 14171 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 3 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63193 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) MARK A STONER Mailing Address 2415 ROSS STREET City NORTHWOOD State OH Zip Code 43619-1417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 1 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63187 Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) MARK A STONER Mailing Address 2415 ROSS STREET City NORTHWOOD State OH Zip Code 43619-1417 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 315.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63137 Amount of Each Receipt this Period 15.00

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

615.00

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



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

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

FOR LINE NUMBER: PAGE 49 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) <b>MARK A STONER</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 6	
Mailing Address 2415 ROSS STREET		<b>Transaction ID:</b> SA11A1.62994	
City <b>NORTHWOOD</b>	State <b>OH</b>	Amount of Each Receipt this Period 5.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>DAIMLERCHRYSLER</b>	Occupation <b>FACTORY WORKER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00		
<b>B.</b> Full Name (Last, First, Middle Initial) <b>JIMMY D STOUFER SR</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 6	
Mailing Address 315 E LONGFELLOW ST		<b>Transaction ID:</b> SA11A1.63066	
City <b>KANSAS CITY</b>	State <b>MO</b>	Amount of Each Receipt this Period 225.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>FORD MOTOR COMPANY</b>	Occupation <b>FACTORY WORKER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		
<b>C.</b> Full Name (Last, First, Middle Initial) <b>JIMMY D STOUFER SR</b>		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 9 / 2 0 0 6	
Mailing Address 315 E LONGFELLOW ST		<b>Transaction ID:</b> SA11A1.63116	
City <b>KANSAS CITY</b>	State <b>MO</b>	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>FORD MOTOR COMPANY</b>	Occupation <b>FACTORY WORKER</b>		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

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

305.00

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

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

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

FOR LINE NUMBER: PAGE 50 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

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

MELANIE STOWELL

Mailing Address 148 HORTON RD

City State Zip Code  
 MASSENA NY 13662-3221

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GENERAL MOTORS CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 9 / 2 0 0 6

Transaction ID: SA11A1.62986

Amount of Each Receipt this Period

27.00

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

CHRISTOPHERJ SZABO

Mailing Address 4523 NEWBERRY ST

City State Zip Code  
 WAYNE MI 48184-2171

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FORD MOTOR COMPANY

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 0 7 / 2 0 0 6

Transaction ID: SA11A1.63049

Amount of Each Receipt this Period

450.00

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

JAMES W TABOR

Mailing Address 701 FISCHER RD TRLR 91

City State Zip Code  
 CREVE COEUR IL 61610-3987

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CATERPILLAR

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

220.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 1 / 1 7 / 2 0 0 6

Transaction ID: SA11A1.63186

Amount of Each Receipt this Period

220.00

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

697.00

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

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

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

FOR LINE NUMBER: PAGE 51 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) FREDERIC H TOLDO JR Mailing Address 12092 BOLDREY DR City FENTON State MI Zip Code 48430-9653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AUTOMOTIVE COMPONENT CARRIER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 327.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63127 Amount of Each Receipt this Period 300.00
<b>B.</b> Full Name (Last, First, Middle Initial) FREDERIC H TOLDO JR Mailing Address 12092 BOLDREY DR City FENTON State MI Zip Code 48430-9653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AUTOMOTIVE COMPONENT CARRIER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 332.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 6 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63177 Amount of Each Receipt this Period 5.00
<b>C.</b> Full Name (Last, First, Middle Initial) FREDERIC H TOLDO JR Mailing Address 12092 BOLDREY DR City FENTON State MI Zip Code 48430-9653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AUTOMOTIVE COMPONENT CARRIER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 337.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63014 Amount of Each Receipt this Period 5.00

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

310.00

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

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

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

FOR LINE NUMBER: PAGE 52 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) FREDERIC H TOLDO JR Mailing Address 12092 BOLDREY DR City FENTON State MI Zip Code 48430-9653 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer AUTOMOTIVE COMPONENT CARRIER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 364.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 7 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63159 Amount of Each Receipt this Period 27.00
<b>B.</b> Full Name (Last, First, Middle Initial) JOSEPH TRALIES Mailing Address 54 TINDER ROAD City LEVITTOWN State PA Zip Code 19056 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 1 5 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63163 Amount of Each Receipt this Period 300.00
<b>C.</b> Full Name (Last, First, Middle Initial) VESTER TRIPLETT JR Mailing Address 124 W 24TH ST City WILMINGTON State DE Zip Code 19802 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 303.00		Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 0 8 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63059 Amount of Each Receipt this Period 300.00

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

627.00

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

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

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

FOR LINE NUMBER: PAGE 53 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** VESTER TRIPLETT JR

Mailing Address 124 W 24TH ST

City State Zip Code  
 WILMINGTON DE 19802

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63090

Amount of Each Receipt this Period

1.00

Full Name (Last, First, Middle Initial)

**B.** MARK UPTON

Mailing Address 2911 WHISTLER DR

City State Zip Code  
 ARLINGTON TX 76006-2041

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXTRON

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

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

Transaction ID: SA11A1.63101

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C.** LINDA VALENTINE

Mailing Address PO BOX 276

City State Zip Code  
 HURST TX 76053-0276

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
TEXTRON

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.62947

Amount of Each Receipt this Period

75.00

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

151.00

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

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

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

FOR LINE NUMBER: PAGE 54 / 156

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOHN VALKO JR.

Mailing Address 3617 DAISY LN

City State Zip Code  
 RACINE WI 53405-4867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASE CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

370.00

Date of Receipt

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

Transaction ID: SA11A1.62922

Amount of Each Receipt this Period

370.00

Full Name (Last, First, Middle Initial)

B. JOHN VALKO JR.

Mailing Address 3617 DAISY LN

City State Zip Code  
 RACINE WI 53405-4867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CASE CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

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

Transaction ID: SA11A1.63183

Amount of Each Receipt this Period

80.00

Full Name (Last, First, Middle Initial)

C. DANNY VANDERPOOL

Mailing Address 6315 HOWE RD

City State Zip Code  
 ESSEXVILLE MI 48732

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
DELPHI CORPORATION

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.62932

Amount of Each Receipt this Period

300.00

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

750.00

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

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

Use separate schedule(s)  
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FOR LINE NUMBER: PAGE 55 / 156

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) COLLEEN WAKEFIELD Mailing Address 2607 HOLLYWOOD DR City ARLINGTON State TX Zip Code 76013-1221 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63091 Amount of Each Receipt this Period 100.00
<b>B.</b> Full Name (Last, First, Middle Initial) ANTHONY WARENSKJOLD Mailing Address PO BOX 97 City ALVARADO State TX Zip Code 76009-0097 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 1 4 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63211 Amount of Each Receipt this Period 120.00
<b>C.</b> Full Name (Last, First, Middle Initial) ANTHONY WARENSKJOLD Mailing Address PO BOX 97 City ALVARADO State TX Zip Code 76009-0097 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer TEXTRON Occupation FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 330.00		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 2 0 / 2 0 0 6 <b>Transaction ID:</b> SA11A1.63020 Amount of Each Receipt this Period 90.00

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

310.00

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

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** CAROLE A WAWRZYNAK

Mailing Address 23275 CARTER RD

City State Zip Code  
 BOWLING GREEN OH 43402-9299

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
DAIMLERCHRYSLER

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63236

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**B.** ANN WEBB

Mailing Address 1909 FAIRMONT ST

City State Zip Code  
 LANSING MI 48911-7122

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
CITY OF LANSING

Occupation  
CLERICAL

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 2 / 2 7 / 2 0 0 6

Transaction ID: SA11A1.63255

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

**C.** AMY J WESTCOTT

Mailing Address 1310 ELIZABETH AVE NW APT 2

City State Zip Code  
 GRAND RAPIDS MI 49504-3113

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
LEAR

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

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

Transaction ID: SA11A1.63041

Amount of Each Receipt this Period

225.00

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

775.00

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



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** AMY J WESTCOTT

Mailing Address 1310 ELIZABETH AVE NW APT 2

City State Zip Code  
 GRAND RAPIDS MI 49504-3113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LEAR

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

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

Transaction ID: SA11A1.63098

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

**B.** THOMAS E WHALEN

Mailing Address 5678 ASHBROOK DR

City State Zip Code  
 TOLEDO OH 43614-1110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JOHNSON CONTROLS INC

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63106

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

**C.** LOU WHARTON

Mailing Address P. O. BOX 23

City State Zip Code  
 BYERSVILLE OH 43723-0023

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FABRI FORM COMPANY

Occupation  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63094

Amount of Each Receipt this Period

300.00

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

700.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** JEFF WICHMAN

Mailing Address PO BOX 994

City

EULESS

State

TX

Zip Code

76039-0994

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 6

Transaction ID: SA11A1.63199

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

**B.** JEFF WICHMAN

Mailing Address PO BOX 994

City

EULESS

State

TX

Zip Code

76039-0994

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

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

Transaction ID: SA11A1.63228

Amount of Each Receipt this Period

90.00

Full Name (Last, First, Middle Initial)

**C.** DANNY WILLIAMS

Mailing Address PO BOX 276

City

HURST

State

TX

Zip Code

76053-0276

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TEXTRON

Occupation

FACTORY WORKER

Receipt For:

☐ Primary  
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

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

Transaction ID: SA11A1.62972

Amount of Each Receipt this Period

75.00

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

255.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** DARRELL WILLIS

Mailing Address 2711 NW 31ST ST

City State Zip Code  
**FORT WORTH TX 76106-5241**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEXTRON**

Occupation  
**FACTORY WORKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
**03 20 2006**

Transaction ID: SA11A1.62962

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**B.** RAYMOND SCOTT YANEZ

Mailing Address 1348 NORWOOD DR

City State Zip Code  
**HURST TX 76053-4057**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**TEXTRON**

Occupation  
**FACTORY WORKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y  
**03 20 2006**

Transaction ID: SA11A1.63210

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

**C.** STEVEN YAROS

Mailing Address 15231 SPONSELLER RD.

City State Zip Code  
**DEFIANCE OH 43512-8818**

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
**DEFIANCE PRECISION PRODUC-  
TS**

Occupation  
**FACTORY WORKER**

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y  
**02 03 2006**

Transaction ID: SA11A1.63220

Amount of Each Receipt this Period

300.00

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

450.00

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

27581.00

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

Use separate schedule(s)  
or each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63269
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4748.42
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4748.42	

<b>B.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63272
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 43.41
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4791.83	

<b>C.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63275
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1064.42
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 5856.25	

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

5856.25

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

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

Use separate schedule(s)  
or each category of the  
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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 17

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bank One Mailing Address PO Box 206A City State Zip Code Detroit MI 48232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10210.25			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA17.63270 Amount of Each Receipt this Period 4354.00 <b>INTEREST ON CHECKING</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Bank One Mailing Address PO Box 206A City State Zip Code Detroit MI 48232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 10248.25			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA17.63273 Amount of Each Receipt this Period 38.00 <b>INTEREST ON CHECKING</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Bank One Mailing Address PO Box 206A City State Zip Code Detroit MI 48232 FEC ID number of contributing federal political committee. <b>C</b> Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 11281.04			Date of Receipt M M / D D / Y Y Y Y Y 0 2 / 2 8 / 2 0 0 6 <b>Transaction ID:</b> SA17.63276 Amount of Each Receipt this Period 1032.79 <b>INTEREST ON CHECKING</b>

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

5424.79

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

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

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

FOR LINE NUMBER: PAGE 62 / 156

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63271
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 4906.00
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16187.04	

<b>B.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63274
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 42.09
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 16229.13	

<b>C.</b> Full Name (Last, First, Middle Initial) Bank One		Date of Receipt M M / D D / Y Y Y Y Y 0 3 / 3 1 / 2 0 0 6
Mailing Address PO Box 206A		<b>Transaction ID:</b> SA17.63277
City Detroit	State MI	Zip Code 48232
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1234.28
Name of Employer	Occupation	INTEREST ON CHECKING
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 17463.41	

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

6182.37

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

17463.41

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 63 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. AMERICAN TIME MANUFACTURING, LTD.**

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
VCAP INCENTIVE #7130

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62387**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

11095.89

**B. AMERICAN TIME MANUFACTURING, LTD.**

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
VCAP INCENTIVE #7131

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62389**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6399.12

**C. AMERICAN TIME MANUFACTURING, LTD.**

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
R5 VCAP PROMO INV #7416

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62401**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

21847.96

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

39342.97

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 64 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. AMERICAN TIME MANUFACTURING, LTD.**

Mailing Address 1600 NORTH CLINTON AVE.

City ROCHESTER State NY Zip Code 14621

Purpose of Disbursement  
R5 VCAP PROMO INV #S 7310-IN

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62404

Date of Disbursement

/   /

Amount of Each Disbursement this Period

6555.74

Full Name (Last, First, Middle Initial)

## **B. ANNIE RAE CHEVROLET**

Mailing Address 13200 US 27 NORTH  
PO BOX 150

City DEWITT State MI Zip Code 48820

Purpose of Disbursement  
GRND PRZ REG 1C VCAP DRAW 2006

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62391

Date of Disbursement

/   /

Amount of Each Disbursement this Period

39708.78

Full Name (Last, First, Middle Initial)

## **C. BRIAN BAIN**

Mailing Address 3276 NORTH WEST DR.

City SAGINAW State MI Zip Code 48603

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62377

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

46764.52

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 65 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. Bank One**

Mailing Address PO Box 206A

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement  
FED TAX/J.WHEELER/945 1ST QTR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62176

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1400.00

Full Name (Last, First, Middle Initial)

## **B. Bank One**

Mailing Address PO Box 206A

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement  
FED TAX WD/J.HUMES/945 1ST QTR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62183

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

## **C. Bank One**

Mailing Address PO Box 206A

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement  
FED TAX WD/L.CHAIVIS/945 1ST QT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62188

Date of Disbursement

/   /

Amount of Each Disbursement this Period

280.00

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

2380.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 66 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. Bank One**

Mailing Address PO Box 206A

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement  
FED TAX WD/FMADDEN 945 1ST OTR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62288

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2800.00

Full Name (Last, First, Middle Initial)

## **B. Bank One**

Mailing Address PO Box 206A

City  
Detroit

State  
MI

Zip Code  
48232

Purpose of Disbursement  
1120 POL TAXES 4TH QTR 2005

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62392

Date of Disbursement

/   /

Amount of Each Disbursement this Period

19610.00

Full Name (Last, First, Middle Initial)

## **C. BRAD A BENZENBERG**

Mailing Address 17566 SCHROEDER RD

City  
BRANT

State  
MI

Zip Code  
48614-8777

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62365

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

22910.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 67 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ROBERT BETTS**

Mailing Address 2345 JEFFERSON DR. SE

City GRAND RAPIDS State MI Zip Code 49507

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62367**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. BRAZILE & ASSOCIATES, LLC**

Mailing Address 1001 G STREET NW

City WASHINGTON State DC Zip Code 20001

Purpose of Disbursement  
SPEAKER HONORARIUM & EXPENSES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62395**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

517.60

Full Name (Last, First, Middle Initial)

**C. PATRICK CAMPBELL**

Mailing Address 9481 BURING TREE DR

City SAGINAW State MI Zip Code 48609

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62363**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1517.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LILLIAN CHAVIS-MILES**

Mailing Address 426 KIMBROUGH LANE

City  
CARMEL

State  
IN

Zip Code  
46032

Purpose of Disbursement  
REG 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62186

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DAVID CORN**

Mailing Address 38 HICKORY AVE.

City  
TAKOMA PARK

State  
MD

Zip Code  
20912

Purpose of Disbursement  
SPEAKER HONORAIUM-2006 NAT CAP

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62201

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC CONGRESSIONAL CAMPAIGN CTE**

Mailing Address 430 S CAPITOL ST, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
2006 MEMBERSHIP DUES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62202

Date of Disbursement

/   /

Amount of Each Disbursement this Period

15000.00

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

16500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 69 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. ENTERPRISE BANK**

Mailing Address 1281 N. WARSON ROAD

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement  
REGION 5 V-CAP PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62199

Date of Disbursement

02 / 15 / 2006

Amount of Each Disbursement this Period

4150.00

Full Name (Last, First, Middle Initial)

## **B. ENTERPRISE BANK**

Mailing Address 1281 N. WARSON ROAD

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement  
REGION 5 V-CAP PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62388

Date of Disbursement

02 / 28 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. ENTERPRISE BANK**

Mailing Address 1281 N. WARSON ROAD

City ST. LOUIS State MO Zip Code 63132

Purpose of Disbursement  
BONDS V-CAP CRUISE DRIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62405

Date of Disbursement

03 / 29 / 2006

Amount of Each Disbursement this Period

2150.00

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

7300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 70 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. GOODWILL PRINTING COMPANY**

Mailing Address P.O. BOX 21820

City State Zip Code  
DETROIT MI 48221-0820

Purpose of Disbursement  
DD TICKETS #60068

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62385

Date of Disbursement

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

Amount of Each Disbursement this Period

19840.31

Full Name (Last, First, Middle Initial)

## **B. GOODWILL PRINTING COMPANY**

Mailing Address P.O. BOX 21820

City State Zip Code  
DETROIT MI 48221-0820

Purpose of Disbursement  
DD TICKET #60067

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62386

Date of Disbursement

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

Amount of Each Disbursement this Period

5762.16

Full Name (Last, First, Middle Initial)

## **C. SANDI HOWE**

Mailing Address 19550 WASHINGTON RD

City State Zip Code  
MORLEY MI 49336

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62381

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

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

26102.47

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JOHN HUMES**

Mailing Address 111 S PEAK AVE.

City  
SHEPHERDSVILLE

State  
KY

Zip Code  
40165

Purpose of Disbursement  
REG 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62182**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. IMPRESSIONS SPECIALITY ADVERTISING**

Mailing Address 8914 S. TELEGRAPH ROAD

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
REGION 1A INCENTIVES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62190**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

8256.76

Full Name (Last, First, Middle Initial)

**C. IMPRESSIONS SPECIALITY ADVERTISING**

Mailing Address 8914 S. TELEGRAPH ROAD

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
REGION 1A INCENTIVES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62191**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2626.00

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

13382.76

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. IMPRESSIONS SPECIALITY ADVERTISING**

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement  
REG 1A INCENTIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62196

Date of Disbursement

MM / DD / YYYY  
02 / 06 / 2006

Amount of Each Disbursement this Period

1775.00

Full Name (Last, First, Middle Initial)

## **B. IMPRESSIONS SPECIALITY ADVERTISING**

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement  
REGION 1A INCENTIVE #79427

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62384

Date of Disbursement

MM / DD / YYYY  
02 / 23 / 2006

Amount of Each Disbursement this Period

275.00

Full Name (Last, First, Middle Initial)

## **C. IMPRESSIONS SPECIALITY ADVERTISING**

Mailing Address 8914 S. TELEGRAPH ROAD

City TAYLOR State MI Zip Code 48180

Purpose of Disbursement  
REGION 1A INCENTIVE-INV.#82526

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62393

Date of Disbursement

MM / DD / YYYY  
03 / 07 / 2006

Amount of Each Disbursement this Period

36105.54

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

38155.54

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CLARA JASPER**

Mailing Address 1008 WASHINGTON ST.

City  
THREE RIVERS

State  
MI

Zip Code  
49093

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62218**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. THOMAS KINGRY**

Mailing Address 2259 MANCHESTER DR

City  
SAGINAW

State  
MI

Zip Code  
48609

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62220**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. KLUBS SPORTS, INC.**

Mailing Address 173 WEST RIVER VALLEY DR.

City  
NEWAYGO

State  
MI

Zip Code  
49337

Purpose of Disbursement  
R1D V-CAP PROMOTION INV #5552

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62398**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2137.60

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

2637.60

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JAMES KRANS**

Mailing Address 236 S MAPLE ST

City  
ZEELAND

State  
MI

Zip Code  
49464

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62214

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**B. FLORENCE MADDEN**

Mailing Address 4096 FLAMINGO AVE SW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49509

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62206

Date of Disbursement

/   /

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

**C. FLORENCE MADDEN**

Mailing Address 4096 FLAMINGO AVE SW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49509

Purpose of Disbursement  
FEDERAL TAXES WITHHELD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62285

Date of Disbursement

/   /

Amount of Each Disbursement this Period

-2800.00

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

7450.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. MARK MERCHANT**

Mailing Address 11300 SEYMOUR RD.

City  
BURT

State  
MI

Zip Code  
48417

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62383**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. DAVID MITCHELL**

Mailing Address 2418 ROBINWOOD AVE.

City  
SAGINAW

State  
MI

Zip Code  
48601

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62222**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL NORRIS**

Mailing Address 460 N AIRPORT RD

City  
HASTINGS

State  
MI

Zip Code  
49058

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62216**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

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

1000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. OFFICEMAX CONTRACT, INC.**

Mailing Address PO BOX 92735

City  
CHICAGO

State  
IL

Zip Code  
60675-2735

Purpose of Disbursement  
V-CAP INCENTIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62193**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4588.78

Full Name (Last, First, Middle Initial)

**B. LINDA PUTNAM**

Mailing Address 1729 ALLEGAN ST.

City  
SAGINAW

State  
MI

Zip Code  
48602

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62373**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. REED'S APPLIANCE COMPANY**

Mailing Address 552 IMLAY CITY ROAD

City  
LAPEER

State  
MI

Zip Code  
48446

Purpose of Disbursement  
'05 DOLLR DRV REPLACE CAMCORDR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62198**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

265.00

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

5353.78

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. RUTH RUFF**

Mailing Address 102 LITTLE KILLARNEY BCH

City  
BAY CITY

State  
MI

Zip Code  
48706

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62369**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. CONNIE RUSH**

Mailing Address 3624 LAKEVIEW DR.

City  
BEAVERTON

State  
MI

Zip Code  
48612

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62212**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

**C. WILLIAM SAVAGE**

Mailing Address 1908 JAMES ST.

City  
ESSEXVILLE

State  
MI

Zip Code  
48732

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62379**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. EDWARD SINDA**

Mailing Address 7175 CLIPPERT STREET

City  
TAYLOR

State  
MI

Zip Code  
48180

Purpose of Disbursement  
R1A PROM0 2ND PZE WNR V-CAP DR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62400**

Date of Disbursement

/

Amount of Each Disbursement this Period

322.00

Full Name (Last, First, Middle Initial)

**B. SWIFT PRINTING COMPANY**

Mailing Address 404 BRIDGE STREET NW

City  
GRAND RAPIDS

State  
MI

Zip Code  
49504

Purpose of Disbursement  
R1D V-CAP PROMOTION #28690

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62203**

Date of Disbursement

/

Amount of Each Disbursement this Period

265.00

Full Name (Last, First, Middle Initial)

**C. THE PUBLIC RESPONSE GROUP INC.**

Mailing Address 1038 STERLING AVE.  
SUITE 210

City  
FLOSSMOOR

State  
IL

Zip Code  
60422

Purpose of Disbursement  
SAVE AMERICAN JOBS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62195**

Date of Disbursement

/

Amount of Each Disbursement this Period

15399.99

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

15986.99

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. THE PUBLIC RESPONSE GROUP INC.**

Mailing Address 1038 STERLING AVE.  
SUITE 210

City FLOSSMOOR State IL Zip Code 60422

Purpose of Disbursement  
SAVE AMERICAN JOBS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62197

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3730.00

Full Name (Last, First, Middle Initial)

## **B. THE TRAVEL COMPANY**

Mailing Address 11457 OLIVE BLVD.,  
WEST OAK SQUARE

City ST. LOUIS State MO Zip Code 63141

Purpose of Disbursement  
REG 5 V-CAP INCENTIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62189

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4130.50

Full Name (Last, First, Middle Initial)

## **C. THE TRAVEL COMPANY**

Mailing Address 11457 OLIVE BLVD.,  
WEST OAK SQUARE

City ST. LOUIS State MO Zip Code 63141

Purpose of Disbursement  
REGION 5 V-CAP PROMOTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

Transaction ID: SB21B.62396

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4292.60

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

12153.10

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. TRINIDAD URIBE**

Mailing Address 4070 WASHINGTON

City  
SAGINAW

State  
MI

Zip Code  
48601

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62210**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

Full Name (Last, First, Middle Initial)

**B. LUANNE VANDERLAAN**

Mailing Address 11001 NUGGET AVE. NE

City  
ROCKFORD

State  
MI

Zip Code  
49341

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62371**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. MICHAEL VINCENT**

Mailing Address 3903 COLLINGWOOD AVE SW

City  
WYOMING

State  
MA

Zip Code  
49519

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

**Transaction ID: SB21B.62375**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1400.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. VIZUAL EXPRESS**

Mailing Address 440 E. CENTER STREET

City  
MARION

State  
OH

Zip Code  
43302

Purpose of Disbursement  
R2B V-CAP INCENTIVE

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62175

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5875.61

Full Name (Last, First, Middle Initial)

## **B. VIZUAL EXPRESS**

Mailing Address 440 E. CENTER STREET

City  
MARION

State  
OH

Zip Code  
43302

Purpose of Disbursement  
R2B V-CAP INCENTIVE INV #5392

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62397

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4217.27

Full Name (Last, First, Middle Initial)

## **C. JACK WHEELER**

Mailing Address 1900 CHARTUES COURT

City  
KOKOMO

State  
IN

Zip Code  
46902

Purpose of Disbursement  
REG 3 V-CAP DRAWING

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB21B.62179

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

15092.88

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. JACK WHITE**

Mailing Address 5545 FIELDSTONE CT

City  
MIDDLEVILLE

State  
MI

Zip Code  
49333

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID: SB21B.62361**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. LARRY WILSON**

Mailing Address 2282 PINCONNING ROAD

City  
RHODES

State  
MA

Zip Code  
48652

Purpose of Disbursement  
REGION 1D PRIZES

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

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

**Transaction ID: SB21B.62208**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1000.00

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

277680.21

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. ABERCROMBIE FOR CONGRESS**

Mailing Address 2469 SOUTH KING STREET

City HONOLULU State HI Zip Code 96826

Purpose of Disbursement  
NEIL ABERCROMBIE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: HI District: 1

Transaction ID: SB23.62481

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. ABERCROMBIE FOR CONGRESS**

Mailing Address 2469 SOUTH KING STREET

City HONOLULU State HI Zip Code 96826

Purpose of Disbursement  
NEIL ABERCROMBIE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: HI District: 1

Transaction ID: SB23.62483

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. ACKERMAN FOR CONGRESS**

Mailing Address PO BOX 95

City FRESH MEADOWS State NY Zip Code 11365

Purpose of Disbursement  
GARY ACKERMAN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 05

Transaction ID: SB23.62558

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** AFL-CIO PCC

Mailing Address 815 16TH STREET

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62457

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B.** AKAKA IN 2006

Mailing Address 301 4TH STREET, NE, 2ND FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
DANIEL K AKAKA

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: HI District:

Transaction ID: SB23.62482

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C.** ALAN MOLLOHAN FOR CONGRESS COMMITTEE

Mailing Address PO BOX 1343

City  
FAIRMONT

State  
WV

Zip Code  
26555-1343

Purpose of Disbursement  
ALAN B MOLLOHAN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 1

Transaction ID: SB23.62637

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. ALAN MOLLOHAN FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 1343

City  
FAIRMONT

State  
WV

Zip Code  
26555-1343

Purpose of Disbursement  
ALAN B MOLLOHAN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WV District: 1

Transaction ID: SB23.62638

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. ALEXANDER GREEN FOR CONGRESS**

Mailing Address 3003 SOUTH LOOP WEST  
SUITE 321

City  
HOUSTON

State  
TX

Zip Code  
77054

Purpose of Disbursement  
ALEXANDER GREEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 9

Transaction ID: SB23.62614

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **C. ALEXANDER GREEN FOR CONGRESS**

Mailing Address 3003 SOUTH LOOP WEST  
SUITE 321

City  
HOUSTON

State  
TX

Zip Code  
77054

Purpose of Disbursement  
ALEXANDER GREEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 9

Transaction ID: SB23.62620

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. ALL AMERICA PAC**

Mailing Address 1070 THOMAS JEFFERSON ST.  
NW #202

City WASHINGTON State DC Zip Code 20007

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62462

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 07 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. A LOT OF PEOPLE FOR DAVE OBEY**

Mailing Address P.O. BOX 75214

City WASHINGTON State DC Zip Code 20013-5214

Purpose of Disbursement  
DAVID OBEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 7

Transaction ID: SB23.62631

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 26 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. AMERICA'S LEADERSHIP PAC**

Mailing Address 198-1/2 F STREET, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62466

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 27 / 2006

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. ANNA ESHOO FOR CONGRESS**

Mailing Address P.O. BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
ANNA ESHOO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 14

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62420

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. ANNA ESHOO FOR CONGRESS**

Mailing Address P.O. BOX 636

City ANNANDALE State VA Zip Code 22003

Purpose of Disbursement  
ANNA ESHOO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 14

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62438

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BARBARA LEE FOR CONGRESS**

Mailing Address 1127 11TH STREET, 225

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
BARBARA LEE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 9

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62441

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. BARNEY FRANK FOR CONGRESS**

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
BARNEY FRANK

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 04

Transaction ID: SB23.62510

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. BECERRA FOR CONGRESS**

Mailing Address PO BOX 261060

City  
LOS ANGELES

State  
CA

Zip Code  
90026

Purpose of Disbursement  
XAVIER BECERRA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 31

Transaction ID: SB23.62439

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. BEN CARDIN FOR CONGRESS**

Mailing Address 38 IVY STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
BENJAMIN CARDIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 3

Transaction ID: SB23.62517

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BEN CARDIN FOR CONGRESS**

Mailing Address 38 IVY STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
BENJAMIN CARDIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 3

Transaction ID: SB23.62519

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BEN CARDIN FOR CONGRESS**

Mailing Address 38 IVY STREET, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
BENJAMIN CARDIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 3

Transaction ID: SB23.62520

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BERRY FOR CONGRESS**

Mailing Address 227 MASSACHUSETTS AVE.,  
N.E., SUITE 101

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
MARION BERRY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.62408

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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

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

Full Name (Last, First, Middle Initial)

## **A. BERRY FOR CONGRESS**

Mailing Address 227 MASSACHUSETTS AVE.,  
N.E., SUITE 101

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
MARION BERRY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District: 01

Transaction ID: SB23.62411

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. BETTY MCCOLLUM FOR CONGRESS**

Mailing Address PO BOX 14131

City ST PAUL State MN Zip Code 55114-0131

Purpose of Disbursement  
BETTY MCCOLLUM

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 4

Transaction ID: SB23.62533

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. BISHOP FOR CONGRESS**

Mailing Address PO BOX 909

City COLUMBUS State GA Zip Code 31902

Purpose of Disbursement  
TIMOTHY BISHOP

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 01

Transaction ID: SB23.62573

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BOBBY SCOTT FOR CONGRESS**

Mailing Address PO BOX 251

City  
NEWPORT NEWS

State  
VA

Zip Code  
23607

Purpose of Disbursement  
ROBERT C SCOTT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VA District: 3

Transaction ID: SB23.62622

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BOB ETHERIDGE FOR CONGRESS**

Mailing Address PO BOX 28001

City  
RALEIGH

State  
NC

Zip Code  
27611

Purpose of Disbursement  
BOB ETHERIDGE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 2

Transaction ID: SB23.62540

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BOB FILNER FOR CONGRESS**

Mailing Address P.O. BOX 127868

City  
SAN DIEGO

State  
CA

Zip Code  
92112

Purpose of Disbursement  
BOB FILNER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 51

Transaction ID: SB23.62423

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BOSWELL FOR CONGRESS**

Mailing Address PO BOX 823

City  
INDIANOLA

State  
IA

Zip Code  
50125

Purpose of Disbursement  
LEONARD L BOSWELL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA District: 3

Transaction ID: SB23.62484

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. BOUCHER FOR CONGRESS**

Mailing Address PO BOX 2000

City  
ABINGDON

State  
VA

Zip Code  
24212

Purpose of Disbursement  
RICHARD BOUCHER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VA District: 9

Transaction ID: SB23.62621

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. BRAD MILLER FOR CONGRESS CAMPAIGN**

Mailing Address 3803 B COMPUTER DRIVE  
SUITE 110

City  
RALEIGH

State  
NC

Zip Code  
27609

Purpose of Disbursement  
BRAD MILLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.62539

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. BRAD MILLER FOR CONGRESS CAMPAIGN**

Mailing Address 3803 B COMPUTER DRIVE  
SUITE 110

City RALEIGH State NC Zip Code 27609

Purpose of Disbursement  
BRAD MILLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 13

Transaction ID: SB23.62541

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. BRIAN BAIRD FOR CONGRESS CAMPAIGN**

Mailing Address 442 NEW JERSEY AVENUE S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
BRIAN BAIRD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.62625

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **C. BRIAN BAIRD FOR CONGRESS CAMPAIGN**

Mailing Address 442 NEW JERSEY AVENUE S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
BRIAN BAIRD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 03

Transaction ID: SB23.62628

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. BRYAN KENNEDY FOR CONGRESS**

Mailing Address 823 NORTH SECOND STREET,  
SUITE 103

City MILWAUKEE State WI Zip Code 53203

Purpose of Disbursement  
BRYAN KENNEDY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WI District: 05

**Transaction ID: SB23.62630**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. BUTTERFIELD FOR CONGRESS COMMITTEE**

Mailing Address 800 W. HINES STREET

City WILSON State NC Zip Code 27893

Purpose of Disbursement  
G K. BUTTERFIELD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 1

**Transaction ID: SB23.62542**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. BUTTERFIELD FOR CONGRESS COMMITTEE**

Mailing Address 800 W. HINES STREET

City WILSON State NC Zip Code 27893

Purpose of Disbursement  
G K. BUTTERFIELD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NC District: 1

**Transaction ID: SB23.62543**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

6000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. CAMPAIGN TO ELECT JIM MARSHALL**

Mailing Address PO BOX 125

City  
MACON

State  
GA

Zip Code  
31202

Purpose of Disbursement  
JIM MARSHALL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 03

Transaction ID: SB23.62480

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. CAPUANO FOR CONGRESS**

Mailing Address 227 MASSACHUSETTS AVE NE  
 SUITE 101

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
MICHAEL E. CAPUANO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 8

Transaction ID: SB23.62508

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. CARDOZA FOR CONGRESS**

Mailing Address PO BOX 2749

City  
MERCED

State  
CA

Zip Code  
95344

Purpose of Disbursement  
DENNIS CARDOZA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 18

Transaction ID: SB23.62428

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CARNEY FOR CONGRESS**

Mailing Address PO BOX A

City  
CLARKS SUMMIT

State  
PA

Zip Code  
18411

Purpose of Disbursement  
CHRIS CARNEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 10

Transaction ID: SB23.62594

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. CHANDLER FOR CONGRESS**

Mailing Address PO BOX 12678

City  
LEXINGTON

State  
KY

Zip Code  
40583

Purpose of Disbursement  
BEN CHANDLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY District: 06

Transaction ID: SB23.62506

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. CHARLES A. GONZALEZ CONGRESSIONAL**

Mailing Address P O BOX 12612  
1215 BROADWAY

City  
SAN ANTONIO

State  
TX

Zip Code  
78212

Purpose of Disbursement  
CHARLES A. GONZALEZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 20

Transaction ID: SB23.62616

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

12000.00

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



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

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CIRO RODRIGUEZ FOR CONGRESS**

Mailing Address P O BOX 14528

City  
SAN ANTONIO

State  
TX

Zip Code  
78214

Purpose of Disbursement  
CIRO RODRIGUEZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 28

**Transaction ID: SB23.62618**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. CITIZENS FOR BOBBY RUSH**

Mailing Address 514 EAST 95TH STREET

City  
CHICAGO

State  
IL

Zip Code  
60619

Purpose of Disbursement  
BOBBY L RUSH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 1

**Transaction ID: SB23.62490**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CITIZENS FOR BOBBY RUSH**

Mailing Address 514 EAST 95TH STREET

City  
CHICAGO

State  
IL

Zip Code  
60619

Purpose of Disbursement  
BOBBY L RUSH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 1

**Transaction ID: SB23.62494**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

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

8500.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** CLYBURN FOR CONGRESS

Mailing Address PO BOX 12567

City COLUMBIA State SC Zip Code 29211

Purpose of Disbursement  
JAMES CLYBURN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: SC District: 06

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62603

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B.** CLYBURN FOR CONGRESS

Mailing Address PO BOX 12567

City COLUMBIA State SC Zip Code 29211

Purpose of Disbursement  
JAMES CLYBURN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: SC District: 06

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62606

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C.** COMMITTEE TO ELECT ARTUR DAVIS TO

Mailing Address PO BOX 1845

City BIRMINGHAM State AL Zip Code 35201

Purpose of Disbursement  
ARTUR DAVIS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AL District: 07

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62406

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

5000.00

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. COMMITTEE TO ELECT ARTUR DAVIS TO**

Mailing Address PO BOX 1845

City  
BIRMINGHAM

State  
AL

Zip Code  
35201

Purpose of Disbursement  
ARTUR DAVIS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AL District: 07

Transaction ID: SB23.62407

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. COMMITTEE TO ELECT LINDA SANCHEZ**

Mailing Address P.O. BOX 1865

City  
HAWAIIAN GARDENS

State  
CA

Zip Code  
90716

Purpose of Disbursement  
LINDA SANCHEZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 39

Transaction ID: SB23.62431

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. CONGRESSIONAL BLACK CAUCUS PAC**

Mailing Address 1701 PENNSYLVANIA NW #960

City  
WASHINGTON

State  
DC

Zip Code  
20006

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62463

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 100 / 156

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. CONGRESSMAN BART GORDON COMMITTEE**

Mailing Address PO BOX 2008

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement  
BART GORDON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 6

Transaction ID: SB23.62610

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

## **B. CONGRESSMAN BART GORDON COMMITTEE**

Mailing Address PO BOX 2008

City MURFREESBORO State TN Zip Code 37133

Purpose of Disbursement  
BART GORDON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TN District: 6

Transaction ID: SB23.62611

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. COOPER FOR CONGRESS COMMITTEE**

Mailing Address 503 CAPITOL COURT  
N.E. SUITE 100

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
JIM COOPER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TN District: 5

Transaction ID: SB23.62609

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

5000.00

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

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. COSTELLO FOR CONGRESS COMMITTEE**

Mailing Address P.O. BOX 8250

City BELLEVILLE State IL Zip Code 62222

Purpose of Disbursement  
JERRY F COSTELLO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 12

Transaction ID: SB23.62500

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. COURTNEY FOR CONGRESS**

Mailing Address PO BOX 1372

City VERNON State CT Zip Code 06066

Purpose of Disbursement  
JOE COURTNEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 02

Transaction ID: SB23.62453

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. CRANLEY FOR CONGRESS**

Mailing Address 4369 CARNATION CR

City CINCINNATI State OH Zip Code 45238

Purpose of Disbursement  
JOHN CRANLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 01

Transaction ID: SB23.62581

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

12000.00

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

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CROWLEY FOR CONGRESS**

Mailing Address 6282 OCCOQUAN FORREST DRIVE

City MANASSAS State VA Zip Code 20112

Purpose of Disbursement  
JOSEPH CROWLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 7

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62557

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CROWLEY FOR CONGRESS**

Mailing Address 6282 OCCOQUAN FORREST DRIVE

City MANASSAS State VA Zip Code 20112

Purpose of Disbursement  
JOSEPH CROWLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: NY District: 7

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62563

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. CUMMINGS FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
ELIJAH CUMMINGS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MD District: 7

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62512

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. CUMMINGS FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
ELIJAH CUMMINGS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 7

Transaction ID: SB23.62515

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. CUMMINGS FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
ELIJAH CUMMINGS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 7

Transaction ID: SB23.62522

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. DAVID WU FOR CONGRESS**

Mailing Address 818 SW THIRD AVENUE #1182

City  
PORTLAND

State  
OR

Zip Code  
97204

Purpose of Disbursement  
DAVID WU

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 1

Transaction ID: SB23.62588

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DAVID WU FOR CONGRESS**

Mailing Address 818 SW THIRD AVENUE #1182

City  
PORTLANDState  
ORZip Code  
97204Purpose of Disbursement  
DAVID WU

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 1

Transaction ID: SB23.62592

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. DAVIS FOR CONGRESS**

Mailing Address PO BOX 2842

City  
WASHINGTONState  
DCZip Code  
20013Purpose of Disbursement  
DANNY K DAVIS

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 7

Transaction ID: SB23.62498

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	6

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS**Mailing Address 1725 MAIN STREET  
SUITE 215City  
WESTONState  
FLZip Code  
33326Purpose of Disbursement  
DEBBIE W. SCHULTZ

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 20

Transaction ID: SB23.62473

Date of Disbursement

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

Amount of Each Disbursement this Period

4000.00

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

10000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS**

Mailing Address 1725 MAIN STREET  
SUITE 215

City WESTON State FL Zip Code 33326

Purpose of Disbursement  
DEBBIE W. SCHULTZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 20

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62478

Date of Disbursement

03 / 30 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. DEFAZIO FOR CONGRESS**

Mailing Address PO BOX 1316

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement  
PETER DEFAZIO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OR District: 4

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62586

Date of Disbursement

01 / 13 / 2006

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

## **C. DEFAZIO FOR CONGRESS**

Mailing Address PO BOX 1316

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement  
PETER DEFAZIO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OR District: 4

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62589

Date of Disbursement

03 / 03 / 2006

Amount of Each Disbursement this Period

1000.00

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

9000.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. DIANA DEGETTE FOR CONGRESS**

Mailing Address PO BOX 75214

City  
WASHINGTONState  
DCZip Code  
20013-5214Purpose of Disbursement  
DIANA DEGETTE

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 01

Transaction ID: SB23.62450

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. DOGGETT FOR US CONGRESS COMMITTEE**

Mailing Address 138 D STREET, SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
LLOYD DOGGETT

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 10

Transaction ID: SB23.62615

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	7	/	2	0	0	6

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. DONALD PAYNE FOR CONGRESS**

Mailing Address PO BOX 2406

City  
NEWARKState  
NJZip Code  
07114Purpose of Disbursement  
DONALD PAYNE

Candidate Name

Category/  
TypeOffice Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 10

Transaction ID: SB23.62549

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	7	/	2	0	0	6

Amount of Each Disbursement this Period

4000.00

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

8000.00

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

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. DOYLE FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 17426

City  
PITTSBURGH

State  
PA

Zip Code  
15235

Purpose of Disbursement  
MIKE DOYLE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 14

Transaction ID: SB23.62595

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. EARL BLUMENAUER FOR CONGRESS**

Mailing Address P.O. BOX 1396

City  
PORTLAND

State  
OR

Zip Code  
97207

Purpose of Disbursement  
EARL BLUMENAUER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 3

Transaction ID: SB23.62587

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. EARL BLUMENAUER FOR CONGRESS**

Mailing Address P.O. BOX 1396

City  
PORTLAND

State  
OR

Zip Code  
97207

Purpose of Disbursement  
EARL BLUMENAUER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 3

Transaction ID: SB23.62590

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. EARL POMEROY FOR CONGRESS**

Mailing Address PO BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
EARL POMEROY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ND District: 01

Transaction ID: SB23.62544

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. ENGEL FOR CONGRESS**

Mailing Address 115 D ST, SE #102

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
ELIOT L ENGEL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 17

Transaction ID: SB23.62566

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. FARRELL FOR CONGRESS**

Mailing Address PO BOX 5136

City  
WESTPORT

State  
CT

Zip Code  
06881

Purpose of Disbursement  
DIANE FARRELL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 04

Transaction ID: SB23.62452

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. FRANCINE BUSBY FOR CONGRESS**

Mailing Address PO BOX 712

City CARDIFF State CA Zip Code 92007

Purpose of Disbursement  
FRANCINE BUSBY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 50

Transaction ID: SB23.62435

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF BENNIE THOMPSON**

Mailing Address PO BOX 100

City BOLTON State MS Zip Code 39041

Purpose of Disbursement  
BENNIE THOMPSON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MS District: 02

Transaction ID: SB23.62538

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF CAROLYN MCCARTHY COMMITTEE**

Mailing Address 38 IVY STREET SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
CAROLYN MCCARTHY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 4

Transaction ID: SB23.62567

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF CONGRESSMAN TIM HOLDEN**

Mailing Address PO BOX 37

City  
ST CLAIR

State  
PA

Zip Code  
17970

Purpose of Disbursement  
TIM HOLDEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 17

Transaction ID: SB23.62596

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF CORRINE BROWN**

Mailing Address 421 NEW JERSEY AVENUE SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
CORRINE BROWN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 03

Transaction ID: SB23.62472

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF CORRINE BROWN**

Mailing Address 421 NEW JERSEY AVENUE SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
CORRINE BROWN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 03

Transaction ID: SB23.62475

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DICK DURBIN**

Mailing Address PO BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
DICK DURBIN

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

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

State: IL District:

**Transaction ID: SB23.62497**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF FARR**

Mailing Address 227 MASSACHUSETTS AVE, NE  
SUITE 302

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
SAM FARR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 17

**Transaction ID: SB23.62425**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF GEORGE MILLER**

Mailing Address 300 NORTH LEE ST SUITE 500

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
GEORGE MILLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 7

**Transaction ID: SB23.62448**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JIM CLYBURN**

Mailing Address 501 CAPITOL COURT NE SUITE 100

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
JAMES CLYBURN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SC District: 06

Transaction ID: SB23.62600

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JIM CLYBURN**

Mailing Address 501 CAPITOL COURT NE SUITE 100

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
JAMES CLYBURN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 06

Transaction ID: SB23.62605

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF JIM MCDERMOTT**

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City  
MANASSAS

State  
VA

Zip Code  
20112

Purpose of Disbursement  
JIM MCDERMOTT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 07

Transaction ID: SB23.62627

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

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

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

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF JIM OBERSTAR**

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
JIM OBERSTAR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MN District: 8

Transaction ID: SB23.62534

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOHN LAESCH**

Mailing Address PO BOX 381

City  
YORKVILLE

State  
IL

Zip Code  
60560

Purpose of Disbursement  
JOHN LAESCH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 14

Transaction ID: SB23.62496

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF KENT CONRAD**

Mailing Address 420 C STREET, NE  
 LOWER LEVEL

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
KENT CONRAD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District:

Transaction ID: SB23.62545

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

7000.00

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

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

Use separate schedule(s)  
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(check only one)

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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF LOIS CAPPS**

Mailing Address PO BOX 23940

City SANTA BARBARA State CA Zip Code 93121

Purpose of Disbursement  
LOIS CAPPS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 23

Transaction ID: SB23.62426

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF MAURICE HINCHEY**

Mailing Address 503 CAPITOL COURT NE  
SUITE 100

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
MAURICE HINCHEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 22

Transaction ID: SB23.62564

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF RAHM EMANUEL**

Mailing Address PO BOX 101124

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement  
RAHM EMANUEL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 05

Transaction ID: SB23.62489

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. FRIENDS OF ROBERT C BYRD COMMITTEE**

Mailing Address 424 C STREET, NW

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
ROBERT C BYRD

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WV District:

Transaction ID: SB23.62635

Date of Disbursement

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

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. FRIENDS OF ROSA DELAURO**

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

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
ROSA DELAURO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CT District: 3

Transaction ID: SB23.62451

Date of Disbursement

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

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. FRIENDS OF WEINER**

Mailing Address 442 NEW JERSEY AVENUE SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
ANTHONY WEINER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 9

Transaction ID: SB23.62572

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 2 9 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. GENE GREEN CONGRESSIONAL CAMPAIGN**

Mailing Address PO BOX 16128

City  
HOUSTON

State  
TX

Zip Code  
77222

Purpose of Disbursement  
GENE GREEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 29

Transaction ID: SB23.62617

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **B. GRANT FOR CONGRESS**

Mailing Address PO BOX 489

City  
FRUITLAND

State  
ID

Zip Code  
83619

Purpose of Disbursement  
LARRY GRANT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ID District: 01

Transaction ID: SB23.62486

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

## **C. GUTIERREZ FOR CONGRESS**

Mailing Address 2300 WEST WABANSIA SUITE 334

City  
CHICAGO

State  
IL

Zip Code  
60647

Purpose of Disbursement  
LUIS GUTIERREZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 4

Transaction ID: SB23.62493

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

9000.00

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

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

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. HACKETT FOR CONGRESS**

Mailing Address 27 NORTH 2ND

City BATAVIA State OH Zip Code 45103

Purpose of Disbursement  
PAUL HACKETT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 02

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62574

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. HACKETT FOR CONGRESS**

Mailing Address 27 NORTH 2ND

City BATAVIA State OH Zip Code 45103

Purpose of Disbursement  
PAUL HACKETT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 02

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62575

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. HAROLD FORD JR. FOR TENNESSEE**

Mailing Address 1225 I STREET NW  
SUITE 600

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
HAROLD FORD JR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

State: TN District:

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62613

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 1 4 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

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

11000.00

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

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. HERSETH FOR CONGRESS**

Mailing Address PO BOX 884

City BROOKINGS State SD Zip Code 57006

Purpose of Disbursement  
STEPHANIE HERSETH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SD District: 1

Transaction ID: SB23.62608

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. HIGGINS FOR CONGRESS**

Mailing Address PO BOX 28

City BUFFALO State NY Zip Code 14220

Purpose of Disbursement  
BRIAN M. HIGGINS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 27

Transaction ID: SB23.62562

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. HIGGINS FOR CONGRESS**

Mailing Address PO BOX 28

City BUFFALO State NY Zip Code 14220

Purpose of Disbursement  
BRIAN M. HIGGINS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 27

Transaction ID: SB23.62571

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

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

5000.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A.** HILLPAC

Mailing Address 1717 K STREET NW  
#309B

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62465

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 22 / 2006

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.** HOOLEY FOR CONGRESS

Mailing Address P.O. BOX 465

City WEST LINN State OR Zip Code 97068

Purpose of Disbursement  
DARLENE HOOLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OR District: 05

Transaction ID: SB23.62585

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
01 / 13 / 2006

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C.** HOOLEY FOR CONGRESS

Mailing Address P.O. BOX 465

City WEST LINN State OR Zip Code 97068

Purpose of Disbursement  
DARLENE HOOLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OR District: 05

Transaction ID: SB23.62591

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

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

5500.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. HOYER FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
STENY HOYER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MD District: 5

Transaction ID: SB23.62513

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. HOYER FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
STENY HOYER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 5

Transaction ID: SB23.62514

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. HOYER FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
STENY HOYER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 5

Transaction ID: SB23.62516

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

3000.00

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



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

Use separate schedule(s)  
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<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. INSLEE FOR CONGRESS**

Mailing Address PO BOX 33027

City SEATTLE State WA Zip Code 98133

Purpose of Disbursement  
JAY INSLEE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WA District: 04

Transaction ID: SB23.62626

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B. INSLEE FOR CONGRESS**

Mailing Address PO BOX 33027

City SEATTLE State WA Zip Code 98133

Purpose of Disbursement  
JAY INSLEE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WA District: 04

Transaction ID: SB23.62629

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. JACK JACKSON JR. FOR CONGRESS**

Mailing Address PO BOX 782

City WINDOW ROCK State AZ Zip Code 86515

Purpose of Disbursement  
JACK JACKSON JR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 01

Transaction ID: SB23.62414

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

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

Full Name (Last, First, Middle Initial)

**A. JESSE JACKSON, JR FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
JESSE JACKSON, JR.

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 2

Transaction ID: SB23.62499

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JILL DERBY FOR CONGRESS**

Mailing Address 1298 KINGSBURY GRADE

City GARDNERVILLE State NV Zip Code 89460

Purpose of Disbursement  
JILL DERBY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV District: 02

Transaction ID: SB23.62555

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. JIM COSTA FOR CONGRESS**

Mailing Address 1127 11TH ST., SUITE 606

City SACRAMENTO State CA Zip Code 95814

Purpose of Disbursement  
JIM COSTA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 20

Transaction ID: SB23.62437

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

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

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

Full Name (Last, First, Middle Initial)

## **A. JOHN LEWIS FOR CONGRESS COMMITTEE**

Mailing Address 4212 37TH ST., NW

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
JOHN LEWIS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: GA District: 5

Transaction ID: SB23.62479

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. JOHN SPRATT FOR CONGRESS**

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
JOHN SPRATT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 5

Transaction ID: SB23.62601

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. JOHN SPRATT FOR CONGRESS**

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
JOHN SPRATT

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: SC District: 5

Transaction ID: SB23.62604

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

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

4000.00

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

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

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

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

Full Name (Last, First, Middle Initial)

**A. JUANITA MILLENDER-MCDONALD FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
JUANITA MILLENDER-MCDONALD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 37

Transaction ID: SB23.62444

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. JULIA CARSON FOR CONGRESS**

Mailing Address ONE NORTH CAPITOL, SUITE 211

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement  
JULIA CARSON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 10

Transaction ID: SB23.62501

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. JULIA CARSON FOR CONGRESS**

Mailing Address ONE NORTH CAPITOL, SUITE 211

City INDIANAPOLIS State IN Zip Code 46204

Purpose of Disbursement  
JULIA CARSON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 10

Transaction ID: SB23.62503

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. KANSAS DEMOCRATIC PARTY**

Mailing Address P.O. BOX 1914

City  
TOPEKA

State  
KS

Zip Code  
66601

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62505

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 14 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. KAPTUR FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 899

City  
TOLEDO

State  
OH

Zip Code  
43697

Purpose of Disbursement  
MARCY KAPTUR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 9

Transaction ID: SB23.62578

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 03 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. KAPTUR FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 899

City  
TOLEDO

State  
OH

Zip Code  
43697

Purpose of Disbursement  
MARCY KAPTUR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 9

Transaction ID: SB23.62579

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
03 / 03 / 2006

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  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. KEEP NICK RAHALL IN CONGRESS COMMITTEE**

Mailing Address 1301 DELAWARE AVENUE SW  
#N409

City WASHINGTON State DC Zip Code 20024-3913

Purpose of Disbursement  
NICK JOE RAHALL II

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: WV District: 3

Transaction ID: SB23.62636

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

## **B. KILROY FOR CONGRESS**

Mailing Address 929 HARRISON AVE., STE. 305

City COLUMBUS State OH Zip Code 43235

Purpose of Disbursement  
MARY JO KILROY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 15

Transaction ID: SB23.62582

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. KLEIN FOR CONGRESS**

Mailing Address 301 YAMATO RD., SUITE 2198

City BOCA RATON State FL Zip Code 33431

Purpose of Disbursement  
RON KLEIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 22

Transaction ID: SB23.62477

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

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

13000.00

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

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. LANGEVIN FOR CONGRESS**

Mailing Address 301 4TH ST NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
JIM LANGEVIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: RI District: 2

**Transaction ID: SB23.62599**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. LOFGREN FOR CONGRESS**

Mailing Address 236 MASS. AVE, NE SUITE 206

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
ZOE LOFGREN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 16

**Transaction ID: SB23.62429**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. LOIS MURPHY FOR CONGRESS**

Mailing Address PO BOX 1006

City  
POOLI

State  
PA

Zip Code  
19301

Purpose of Disbursement  
LOIS MURPHY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: PA District: 6

**Transaction ID: SB23.62597**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3500.00

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

5500.00

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

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

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for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

## **A. LONE STAR FUND**

Mailing Address P O BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

Transaction ID: SB23.62458

Date of Disbursement

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

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. LOUISE SLAUGHTER REELECTION COMMITTEE**

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
LOUISE SLAUGHTER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.62561

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 1 6 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. LOUISE SLAUGHTER REELECTION COMMITTEE**

Mailing Address P.O. BOX 2884

City  
WASHINGTON

State  
DC

Zip Code  
20013

Purpose of Disbursement  
LOUISE SLAUGHTER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 28

Transaction ID: SB23.62570

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 1 7 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. LUCILLE ROYBAL-ALLARD FOR CONGRESS**

Mailing Address 3415 S SEPULVEDA BLVD  
SUITE 640

City LOS ANGELES State CA Zip Code 90034

Purpose of Disbursement  
LUCILLE ROYBAL-ALLARD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 34

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62422

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 1 / 2 6 / 2 0 0 6

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

## **B. LYNCH FOR CONGRESS**

Mailing Address 55 G STREET

City SOUTH BOSTON State MA Zip Code 02127

Purpose of Disbursement  
STEPHEN LYNCH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MA District: 09

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62509

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 0 3 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. MARCINKOWSKI FOR CONGRESS**

Mailing Address PO BOX 1605

City BRIGHTON State MI Zip Code 48116

Purpose of Disbursement  
JIM MARCINKOWSKI

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 08

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62529

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 2 7 / 2 0 0 6

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. MARCINKOWSKI FOR CONGRESS**

Mailing Address PO BOX 1605

City  
BRIGHTON

State  
MI

Zip Code  
48116

Purpose of Disbursement  
JIM MARCINKOWSKI

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MI District: 08

**Transaction ID: SB23.62530**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. MARK UDALL FOR CONGRESS**

Mailing Address 8690 WOLFF COURT SUITE 200

City  
WESTMINSTER

State  
CO

Zip Code  
80030

Purpose of Disbursement  
MARK UDALL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO District: 02

**Transaction ID: SB23.62449**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. MATSUI FOR CONGRESS**

Mailing Address 729 15TH STREET, N.W.  
SUITE 300

City  
WASHINGTON

State  
DC

Zip Code  
20005

Purpose of Disbursement  
DORIS MATSUI

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 05

**Transaction ID: SB23.62421**

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. MCNULTY FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
MICHAEL MCNULTY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 21

Transaction ID: SB23.62568

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. MENENDEZ FOR SENATE**

Mailing Address 1100 VALLEY BROOK AVENUE  
SUITE #205

City  
LYNDHURST

State  
NJ

Zip Code  
07071

Purpose of Disbursement  
ROBERT MENENDEZ

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District:

Transaction ID: SB23.62551

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. MICHAUD FOR CONGRESS**

Mailing Address 213 LISBON STREET

City  
LEWISTON

State  
ME

Zip Code  
04240

Purpose of Disbursement  
MICHAEL MICHAUD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ME District: 02

Transaction ID: SB23.62525

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. MICHAUD FOR CONGRESS**

Mailing Address 213 LISBON STREET

City  
LEWISTON

State  
ME

Zip Code  
04240

Purpose of Disbursement  
MICHAEL MICHAUD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: ME District: 02

Transaction ID: SB23.62526

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. MIKE ROSS FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 360

City  
PRESCOTT

State  
AR

Zip Code  
71857-0360

Purpose of Disbursement  
MIKE ROSS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AR District: 4

Transaction ID: SB23.62409

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**C. MIKE ROSS FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 360

City  
PRESCOTT

State  
AR

Zip Code  
71857-0360

Purpose of Disbursement  
MIKE ROSS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AR District: 4

Transaction ID: SB23.62410

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. MIKE THOMPSON FOR CONGRESS COMMITTEE**

Mailing Address 442 NEW JERSEY AVE S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
MIKE THOMPSON

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 01

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62427

Date of Disbursement

02 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. MOORE FOR CONGRESS**

Mailing Address PO BOX 16645

City MILWAUKEE State WI Zip Code 53216

Purpose of Disbursement  
GWEN MOORE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WI District: 04

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62632

Date of Disbursement

02 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. MOORE FOR CONGRESS**

Mailing Address PO BOX 16645

City MILWAUKEE State WI Zip Code 53216

Purpose of Disbursement  
GWEN MOORE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: WI District: 04

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62633

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. MURPHY FOR CONGRESS**

Mailing Address PO BOX 127

City  
CHESHIRE

State  
CT

Zip Code  
06410

Purpose of Disbursement  
CHRISTOPHER MURPHY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CT District: 05

Transaction ID: SB23.62455

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. NAPOLITANO FOR CONGRESS**

Mailing Address 227 MASSACHUSETTS AVE, NE  
SUITE 101

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
GRACE NAPOLITANO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 38

Transaction ID: SB23.62430

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. NATIONAL LEADERSHIP PAC**

Mailing Address PO BOX 5577

City  
NEW YORK

State  
NY

Zip Code  
10027

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.62556

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

8500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. NITA LOWEY FOR CONGRESS**

Mailing Address 38 IVY STREET SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
NITA LOWEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 18

Transaction ID: SB23.62569

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. NORTH DAKOTA DEMOCRATIC PARTY**

Mailing Address 420 C STREET NE  
 LOWER LEVEL

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.62459

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. PALLONE FOR CONGRESS**

Mailing Address P.O. BOX 3176

City  
LONG BRANCH

State  
NJ

Zip Code  
07740

Purpose of Disbursement  
FRANK PALLONE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 06

Transaction ID: SB23.62548

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. PASCRELL FOR CONGRESS**

Mailing Address 63 QUARTZ LANE

City PATERSON State NJ Zip Code 07501

Purpose of Disbursement  
WILLIAM J PASCRELL JR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NJ District: 8

Transaction ID: SB23.62547

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. PASTOR FOR ARIZONA COMMITTEE**

Mailing Address PO BOX 6554

City PHOENIX State AZ Zip Code 85005-6554

Purpose of Disbursement  
ED PASTOR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 04

Transaction ID: SB23.62415

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. PASTOR FOR ARIZONA COMMITTEE**

Mailing Address PO BOX 6554

City PHOENIX State AZ Zip Code 85005-6554

Purpose of Disbursement  
ED PASTOR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 04

Transaction ID: SB23.62416

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. PASTOR FOR ARIZONA COMMITTEE**

Mailing Address PO BOX 6554

City  
PHOENIX

State  
AZ

Zip Code  
85005-6554

Purpose of Disbursement  
ED PASTOR

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: AZ District: 04

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62419

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. PAVICH FOR CONGRESS**

Mailing Address PO BOX 1203

City  
BEECHER

State  
IL

Zip Code  
60401

Purpose of Disbursement  
JOHN PAVICH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: IL District: 11

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62488

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. PELOSI FOR CONGRESS**

Mailing Address 1 BUSH ST SUITE 250

City  
SAN FRANCISCO

State  
CA

Zip Code  
94104

Purpose of Disbursement  
NANCY PELOSI

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: CA District: 8

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62432

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
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☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. PENGUIN PAC**

Mailing Address 80 F STREET  
SUITE 804

City  
WASHINGTON

State  
DC

Zip Code

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.62469

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 03 / 30 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. PETE STARK RE-ELECTION COMMITTEE**

Mailing Address PO BOX 75214

City  
WASHINGTON

State  
DC

Zip Code  
20013-5214

Purpose of Disbursement  
FORTNEY (PETE) STARK

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 13

Transaction ID: SB23.62424

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 02 / 16 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. RAUL GRIJALVA FOR CONGRESS**

Mailing Address PO BOX 1242

City  
TUCSON

State  
AZ

Zip Code  
85702-1242

Purpose of Disbursement  
RAUL GRIJALVA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: AZ District: 07

Transaction ID: SB23.62412

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
 01 / 13 / 2006

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. RAUL GRIJALVA FOR CONGRESS**

Mailing Address PO BOX 1242

City  
TUCSON

State  
AZ

Zip Code  
85702-1242

Purpose of Disbursement  
RAUL GRIJALVA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 07

Transaction ID: SB23.62417

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. RAUL GRIJALVA FOR CONGRESS**

Mailing Address PO BOX 1242

City  
TUCSON

State  
AZ

Zip Code  
85702-1242

Purpose of Disbursement  
RAUL GRIJALVA

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: AZ District: 07

Transaction ID: SB23.62418

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. RE-ELECT MCGOVERN COMMITTEE**

Mailing Address PO BOX 60405

City  
WORCESTER

State  
MA

Zip Code  
01606-0405

Purpose of Disbursement  
JIM MCGOVERN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 3

Transaction ID: SB23.62507

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. REYES FOR CONGRESS**

Mailing Address 505 E RIO GRANDE

City EL PASO State TX Zip Code 79902

Purpose of Disbursement  
SILVESTRE REYES

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: TX District: 16

Transaction ID: SB23.62619

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. RICHARD E NEAL FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 2884

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement  
RICHARD E NEAL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MA District: 2

Transaction ID: SB23.62511

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. ROBERT WEXLER FOR CONGRESS COMMITTEE**

Mailing Address 2500 N. MILITARY TRAIL  
SUITE 288

City BOCA RATON State FL Zip Code 33431

Purpose of Disbursement  
ROBERT WEXLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 19

Transaction ID: SB23.62474

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. ROBERT WEXLER FOR CONGRESS COMMITTEE**

Mailing Address 2500 N. MILITARY TRAIL  
SUITE 288

City BOCA RATON State FL Zip Code 33431

Purpose of Disbursement  
ROBERT WEXLER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 19

Transaction ID: SB23.62476

Date of Disbursement

03 / 27 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. SANDERS FOR SENATE**

Mailing Address PO BOX 391

City BURLINGTON State VT Zip Code 05402

Purpose of Disbursement  
BERNARD SANDERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: VT District:

Transaction ID: SB23.62623

Date of Disbursement

02 / 23 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. SANDERS FOR SENATE**

Mailing Address PO BOX 391

City BURLINGTON State VT Zip Code 05402

Purpose of Disbursement  
BERNARD SANDERS

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: VT District:

Transaction ID: SB23.62624

Date of Disbursement

03 / 14 / 2006

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. SARA JO SHETTLES FOR CONGRESS**

Mailing Address 528 NORTH FAIRVIEW AVENUE

City LIBERTY State MO Zip Code 64068

Purpose of Disbursement  
SARA JO SHETTLES

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: SB23.62536

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. SARA JO SHETTLES FOR CONGRESS**

Mailing Address 528 NORTH FAIRVIEW AVENUE

City LIBERTY State MO Zip Code 64068

Purpose of Disbursement  
SARA JO SHETTLES

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: MO District: 06

Transaction ID: SB23.62537

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**C. SCHAKOWSKY FOR CONGRESS**

Mailing Address PO BOX 5130

City EVANSTON State IL Zip Code 60204

Purpose of Disbursement  
JAN SCHAKOWSKY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IL District: 9

Transaction ID: SB23.62491

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. SCHAKOWSKY FOR CONGRESS**

Mailing Address PO BOX 5130

City  
EVANSTON

State  
IL

Zip Code  
60204

Purpose of Disbursement  
JAN SCHAKOWSKY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 9

Transaction ID: SB23.62492

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **B. SCHIFF FOR CONGRESS**

Mailing Address 150 EAST CORSON STREET

City  
PASADENA

State  
CA

Zip Code  
91103

Purpose of Disbursement  
ADAM SCHIFF

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 29

Transaction ID: SB23.62440

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

## **C. SCHIFF FOR CONGRESS**

Mailing Address 150 EAST CORSON STREET

City  
PASADENA

State  
CA

Zip Code  
91103

Purpose of Disbursement  
ADAM SCHIFF

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 29

Transaction ID: SB23.62442

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**SUBTOTAL** of Disbursements This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. SCHWARTZ FOR CONGRESS**

Mailing Address PO BOX 45706

City  
PHILADELPHIA

State  
PA

Zip Code  
19149

Purpose of Disbursement  
ALLYSON SCHWARTZ

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: PA District: 13

Transaction ID: SB23.62598

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SEARCHLIGHT LEADERSHIP FUND**

Mailing Address 2850 CONNECTICUT AVE 1ST FLOOR

City  
WASHINGTON

State  
DC

Zip Code  
20008

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB23.62460

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**C. SERRANO FOR CONGRESS**

Mailing Address 421 NEW JERSEY AVENUE, SE

City  
WASHINGTON

State  
DC

Zip Code  
20003

Purpose of Disbursement  
JOSE SERRANO

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 16

Transaction ID: SB23.62559

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. SHELLEY BERKLEY FOR CONGRESS**

Mailing Address 7432 SILVER PALM COURT

City LAS VEGAS State NV Zip Code 89117

Purpose of Disbursement  
SHELLEY BERKLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 1

Transaction ID: SB23.62552

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 1 / 1 3 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. SHELLEY BERKLEY FOR CONGRESS**

Mailing Address 7432 SILVER PALM COURT

City LAS VEGAS State NV Zip Code 89117

Purpose of Disbursement  
SHELLEY BERKLEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NV District: 1

Transaction ID: SB23.62553

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 0 3 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. SHERMAN FOR CONGRESS COMMITTEE**

Mailing Address 20929 VENTURA BLVD, BOX 615

City WOODLAND HILLS State CA Zip Code 91364

Purpose of Disbursement  
BRAD SHERMAN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 27

Transaction ID: SB23.62436

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. SIFERD FOR CONGRESS**

Mailing Address 212 NORTH ELIZABETH ST.  
SUITE 504

City LIMA State OH Zip Code 45801

Purpose of Disbursement  
RICHARD SIFERD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: OH District: 09

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62577

Date of Disbursement

02 / 16 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. SKINNER FOR CONGRESS**

Mailing Address 6623 TELEGRAPH RD. #303

City BLOOMFIELD State MI Zip Code 48304

Purpose of Disbursement  
NANCY SKINNER

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MI District: 09

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62532

Date of Disbursement

03 / 30 / 2006

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. SOLIDARITY PAC**

Mailing Address C/O PERKINS, COIE, LLP  
607 14TH STREET, NW SUITE 800

City WASHINGTON State DC Zip Code 20005

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62467

Date of Disbursement

03 / 27 / 2006

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  
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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. SOLIS FOR CONGRESS**

Mailing Address 4016 N ROSEMEAD BLVD

City ROSEMEAD State CA Zip Code 91770

Purpose of Disbursement  
HILDA SOLIS

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 32

Transaction ID: SB23.62443

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. STEVE ISRAEL FOR CONGRESS**

Mailing Address 1966 DEER PARK AVE

City DEER PARK State NY Zip Code 11729

Purpose of Disbursement  
STEVE ISRAEL

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 2

Transaction ID: SB23.62565

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. STEVE ROTHMAN FOR CONGRESS INC.**

Mailing Address 38 IVY STREET, S.E.

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement  
STEVE ROTHMAN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ District: 9

Transaction ID: SB23.62546

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. STUPAK FOR CONGRESS**

Mailing Address 998 NORTH ROYAL ST

City  
ALEXANDRIA

State  
VA

Zip Code  
22314

Purpose of Disbursement  
BART STUPAK

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI District: 1

Transaction ID: SB23.62527

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. TAMMY BALDWIN FOR CONGRESS**

Mailing Address P O BOX 696

City  
MADISON

State  
WI

Zip Code  
53701

Purpose of Disbursement  
TAMMY BALDWIN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: WI District: 2

Transaction ID: SB23.62634

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. TIM JOHNSON FOR SOUTH DAKOTA**

Mailing Address 420 C STREET NE

City  
WASHINGTON

State  
DC

Zip Code  
20002

Purpose of Disbursement  
TIM JOHNSON

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☒ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: SD District:

Transaction ID: SB23.62607

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

3000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. TIM MAHONEY FOR FLORIDA**

Mailing Address 11128-408 ROYAL PALM BEACH  
BLVD.

City ROYAL PALM BEACH State FL Zip Code 33411

Purpose of Disbursement  
TIM MAHONEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: FL District: 16

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62471

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

**B. UAW NORTH CAROLINA V-PAC**

Mailing Address 1005 NORTH POINT BOULEVARD  
SUITE 701

City BALTIMORE State MD Zip Code 21224

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB23.62523

Date of Disbursement

/   /

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

**C. VAN HOLLEN FOR CONGRESS**

Mailing Address 3514 FARRAGUT AVENUE

City KENSINGTON State MD Zip Code 20895

Purpose of Disbursement  
CHRIS VAN HOLLEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

State: MD District: 08

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB23.62518

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

10000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A. VAN HOLLEN FOR CONGRESS**

Mailing Address 3514 FARRAGUT AVENUE

City  
KENSINGTON

State  
MD

Zip Code  
20895

Purpose of Disbursement  
CHRIS VAN HOLLEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 08

Transaction ID: SB23.62521

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. VAN HOLLEN FOR CONGRESS**

Mailing Address 3514 FARRAGUT AVENUE

City  
KENSINGTON

State  
MD

Zip Code  
20895

Purpose of Disbursement  
CHRIS VAN HOLLEN

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 08

Transaction ID: SB23.62524

Date of Disbursement

/   /

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. VISCLOSKY FOR CONGRESS**

Mailing Address PO BOX 10003

City  
MERRILLVILLE

State  
IN

Zip Code  
46411

Purpose of Disbursement  
PETER VISCLOSKY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 1

Transaction ID: SB23.62502

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

9000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. VISCLOSKY FOR CONGRESS**

Mailing Address PO BOX 10003

City MERRILLVILLE State IN Zip Code 46411

Purpose of Disbursement  
PETER VISCLOSKY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: IN District: 1

Transaction ID: SB23.62504

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **B. WALSH FOR CONGRESS COMMITTEE**

Mailing Address 4451 BROOKFIELD CORPORATE DR  
SUITE 200

City CHANTILLY State VA Zip Code 20151

Purpose of Disbursement  
JIM WALSH

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: NY District: 25

Transaction ID: SB23.62560

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. WINOGRAD FOR CONGRESS**

Mailing Address 578 WASHINGTON BLVD. #835

City MARINA DEL REY State CA Zip Code 90292

Purpose of Disbursement  
MARCY WINOGRAD

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: CA District: 36

Transaction ID: SB23.62447

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

11000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. WOOLSEY FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 750176

City PETALUMA State CA Zip Code 94975

Purpose of Disbursement  
LYNN WOOLSEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 6

Transaction ID: SB23.62433

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **B. WOOLSEY FOR CONGRESS COMMITTEE**

Mailing Address PO BOX 750176

City PETALUMA State CA Zip Code 94975

Purpose of Disbursement  
LYNN WOOLSEY

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 6

Transaction ID: SB23.62445

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

## **C. ZACK SPACE FOR CONGRESS**

Mailing Address 714 NORTH WOOSTER ST.

City DOVER State OH Zip Code 44622

Purpose of Disbursement  
ZACK SPACE

Candidate Name

Category/  
Type

Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: OH District: 18

Transaction ID: SB23.62584

Date of Disbursement

/   /

Amount of Each Disbursement this Period

5000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

436000.00



# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. IOWA STATE UAW PAC**

Mailing Address 3330 EAST 33RD STREET #10

City DES MOINES State IA Zip Code 50317

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62914

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 1 / 2 5 / 2 0 0 6

Amount of Each Disbursement this Period

75000.00

Full Name (Last, First, Middle Initial)

## **B. MISSOURI STATE DEMOCRATIC PARTY**

Mailing Address P.O. BOX 719

City JEFFERSON CITY State MO Zip Code 65102

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62919

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 2 8 / 2 0 0 6

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

## **C. PA UAW GOOD GOVERNMENT COMMITTEE**

Mailing Address 1375 VIRGINIA DRIVE  
SUITE #201

City FT. WAHSINGTON State PA Zip Code 19034

Purpose of Disbursement  
PA GOOD GOV CM PAC REPLENSHMNT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62918

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 1 5 / 2 0 0 6

Amount of Each Disbursement this Period

100000.00

**SUBTOTAL** of Disbursements This Page (optional) .....

180000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

## **A. TEXAS UAW CAP VOLUNTARY FUND COMMITTEE**

Mailing Address 1341 W MOCKINGBIRD LN STE 310W

City DALLAS State TX Zip Code 75247

Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62915

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 0 6 / 2 0 0 6

Amount of Each Disbursement this Period

75000.00

Full Name (Last, First, Middle Initial)

## **B. UAW LOCAL 1612**

Mailing Address 1375 VIRGINIA DRIVE  
SUITE 202

City FORT WASHINGTON State PA Zip Code 19034-3217

Purpose of Disbursement  
PATRICK ASHTON REIMBURSEMENT

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62916

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 2 / 0 6 / 2 0 0 6

Amount of Each Disbursement this Period

8612.00

Full Name (Last, First, Middle Initial)

## **C. UAW LOCAL 1612**

Mailing Address 1375 VIRGINIA DRIVE  
SUITE 202

City FORT WASHINGTON State PA Zip Code 19034-3217

Purpose of Disbursement  
REIMBURSEMENT-PATRICK ASHTON

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.62920

Date of Disbursement

M  M /  D  D /  Y  Y  Y  Y  
0 3 / 0 7 / 2 0 0 6

Amount of Each Disbursement this Period

5382.50

**SUBTOTAL** of Disbursements This Page (optional) .....

88994.50

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3X)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

**A.** UAW LOCAL 723

Mailing Address 281 DETROIT

City  
MONROE

State  
MI

Zip Code  
48161

Purpose of Disbursement  
REIMB TEMP CAP COORINATOR

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.62913

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	3		2	0	0	6

Amount of Each Disbursement this Period

1437.56

**SUBTOTAL** of Disbursements This Page (optional) .....

1437.56

**TOTAL** This Period (last page this line number only) .....

270432.06

**Image# 27990011938**

Form/Schedule: **SB23** The \$1,000.00 contribution dated 3/7/06 was incorrectly reported for the 2006 Primary. The contribution was  
Transaction ID: **SB23.62497** for the 2008 Primary.

\*\*\*\*\*