

**FEC  
FORM 3X**

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

RECEIVED  
FEC MAIL CENTER

2020 DEC 10 PM 1:21  
Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

SAILORS' UNION OF THE PACIFIC POLITICAL FUND

ADDRESS (number and street)

450 HARRISON STREET

Check if different than previously reported. (ACC)

SAN FRANCISCO

CA

94105

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C 0 0 0 1 1 3 3 8

3. IS THIS REPORT

NEW (N)

OR

AMENDED (A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

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

(b) Monthly Report Due On:

- Feb 20 (M2)
- Mar 20 (M3)
- Apr 20 (M4)
- May 20 (M5)
- Jun 20 (M6)
- Jul 20 (M7)
- Aug 20 (M8)
- Sep 20 (M9)
- Oct 20 (M10)
- Nov 20 (M11) (Non-Election Year Only)
- Dec 20 (M12) (Non-Election Year Only)
- Jan 31 (YE)

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

- Primary (12P)
- Convention (12C)
- General (12G)
- Special (12S)
- Runoff (12R)

Election on

MM / DD / YYYY

in the State of

CA

(d) 30-Day POST-Election Report for the:

- General (30G)
- Runoff (30R)
- Special (30S)

Election on

MM / DD / YYYY

in the State of

CA

5. Covering Period

MM / DD / YYYY

through

MM / DD / YYYY

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 DAVID CONNOLLY

Signature of Treasurer

*David Connolly*

Date

MM / DD / YYYY

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalty

Office Use Only									
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FEC Re

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		21,386.34
(b) Cash on Hand at Beginning of Reporting Period.....	21,957.34	
(c) Total Receipts (from Line 19).....	2,072.00	14,693.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	24,029.34	36,079.34
7. Total Disbursements (from Line 31).....	4,250.00	16,300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	19,779.34	19,779.34
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

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

**For further information contact:**

Federal Election Commission  
1050 First Street, N.E.  
Washington, DC 20463

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

Report Covering the Period: From:

MM / DD / YYYY  
10 / 01 / 2020

To:

MM / DD / YYYY  
11 / 23 / 2020

**I. Receipts**

**COLUMN A**  
Total This Period

**COLUMN B**  
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

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

1 6 9 0 . 0 0

7 7 8 0 . 0 0

(ii) Unitemized.....

3 8 2 . 0 0

6 9 1 3 . 0 0

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

2 0 7 2 . 0 0

1 4 6 9 3 . 0 0

(b) Political Party Committees.....

(c) Other Political Committees (such as PACs).....

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

2 0 7 2 . 0 0

1 4 6 9 3 . 0 0

12. Transfers From Affiliated/Other Party Committees.....

13. All Loans Received.....

14. Loan Repayments Received.....

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

0 0 0

0 0 0

17. Other Federal Receipts (Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

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

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

2 0 7 2 . 0 0

1 4 6 9 3 . 0 0

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

2 0 7 2 . 0 0

1 4 6 9 3 . 0 0

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DETAILED SUMMARY PAGE

of Disbursements

II. Disbursements

COLUMN A  
Total This Period

COLUMN B  
Calendar Year-to-Date

21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0 00	50 00
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures .....		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0 00	50 00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3 000 00	12 500 00
24. Independent Expenditures (use Schedule E) .....		
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....		
26. Loan Repayments Made.....		
27. Loans Made.....		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....		
(b) Political Party Committees .....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....		
29. Other Disbursements (Including Non-Federal Donations).....	1 250 00	3 750 00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds .....		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	4 250 00	16 300 00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	4 250 00	16 300 00

RECORDED AND INDEXED

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

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) .....	2072 00	14693 00
34. Total Contribution Refunds (from Line 28(d)) .....		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2072 00	14693 00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0 00	50 00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....		
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0 00	50 00

NON-FEDERAL INCOME

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

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

FOR LINE NUMBER: PAGE 1 OF 7  
(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)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

**A. Connolly, David**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
450 Harrison Street, Suite 108

City San Francisco State CA Zip Code 94105

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Sailors' Union of the Pacific Occupation (for Individual) President

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1 3 0 0 0 0

Date of Receipt  
MM / DD / YYYY  
11 / 05 / 2020 ✓

Amount of Each Receipt this Period  
4 0 0 0 0 ✓

Memo Item

**B. Henneberry, Mike**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
2811 Otis Dr.

City Alameda State CA Zip Code 94501

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) UFCWS Occupation (for Individual) Retired

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2 0 0 0 0 0 ✓

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period  
0 0 0 ✓

Memo Item

**C. Leeper, Robert**  
Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
6104 B. Walnut Hills Dr.

City Austin State TX Zip Code 78623

FEC ID number of contributing federal political committee. C

Name of Employer (for Individual) Patriot Contract Services Occupation (for Individual) seaman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
2 0 0 0 0 0 ✓

Date of Receipt  
MM / DD / YYYY

Amount of Each Receipt this Period  
0 0 0 ✓

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... 4 0 0 0 0 ✓

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 2 OF 7	
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<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)  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

**A. O'Halloran, Vincent** ✓

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
6058 5th Ave., NE

City: **Seattle** State: **WA** Zip Code: **98115**

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

Name of Employer (for Individual): **Retired** Occupation (for Individual): **seaman**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **1 100 00** ✓

Date of Receipt: **11 / 12 / 2020** ✓

Amount of Each Receipt this Period: **200 00** ✓

Memo Item

**B. Ross, Steven** ✓

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
205 Ridgewood Dr.

City: **San Rafael** State: **CA** Zip Code: **94901**

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

Name of Employer (for Individual): **American President Lines** Occupation (for Individual): **seaman**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **200 00** ✓

Date of Receipt: / /

Amount of Each Receipt this Period: **0 00** ✓

Memo Item

**C. Rydberg, Stephen** ✓

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address  
274 Warrington Ave.

City: **Oakdale** State: **CA** Zip Code: **95361**

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

Name of Employer (for Individual): **Retired** Occupation (for Individual): **seaman**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300 00** ✓

Date of Receipt: / /

Amount of Each Receipt this Period: **0 00** ✓

Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... **200 00**

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

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

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

FOR LINE NUMBER: PAGE 3 OF 7  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

A. <b>Splain, Paul</b> ✓ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt MM / DD / YYYY
Mailing Address 2840 E. Gillian Creek Rd.			
City Sedro Woolley	State WA	Zip Code 98284	Amount of Each Receipt this Period 0.00 ✓
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired		Occupation (for Individual) seaman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00 ✓	

B. <b>Bickford, Archie</b> ✓ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt MM / DD / YYYY
Mailing Address 2886 Vaughn Ave.			
City Poplar Bluff	State MO	Zip Code 63901	Amount of Each Receipt this Period 300.00 ✓
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Retired		Occupation (for Individual) seaman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 850.00 ✓	

C. <b>Idris, Isnin</b> ✓ Full Name of Individual (Last, First, Middle Initial) or Full Organization Name			Date of Receipt MM / DD / YYYY
Mailing Address 1752 Lynwood Drive			
City Concord	State CA	Zip Code 94519	Amount of Each Receipt this Period 0.00 ✓
FEC ID number of contributing federal political committee. C			<input type="checkbox"/> Memo Item
Name of Employer (for Individual) Matson		Occupation (for Individual) seaman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Aggregate Year-to-Date ▼ 200.00 ✓	

SUBTOTAL of Receipts This Page (optional).....	300.00 ✓
TOTAL This Period (last page this line number only).....	

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

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

FOR LINE NUMBER: PAGE 4 OF 7

(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)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

<p><b>A. O'Neill, Terence</b> ✓</p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 139 Billerica Road, unit A2</p> <p>City Chelmsford State MA Zip Code 01824</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) self-employed Occupation (for Individual) N/A</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 300.00</p>		<p>Date of Receipt</p> <p>MM / DD / YYYY</p> <p>Amount of Each Receipt this Period 0.00 ✓</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>B. Pedersen, Georg</b> ✓</p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 2474 Westmont Way, West</p> <p>City Seattle State WA Zip Code 98199</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) N/A Occupation (for Individual) N/A</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 500.00 ✓</p>		<p>Date of Receipt</p> <p>MM / DD / YYYY</p> <p>Amount of Each Receipt this Period 0.00 ✓</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>C. Runyan, Randy</b> ✓</p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 14530 Reis Street</p> <p>City Whittier State CA Zip Code 90604-1830</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer (for Individual) Matson Occupation (for Individual) seaman</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p> <p>Aggregate Year-to-Date ▼ 200.00</p>		<p>Date of Receipt</p> <p>MM / DD / YYYY</p> <p>Amount of Each Receipt this Period 0.00 ✓</p> <p><input type="checkbox"/> Memo Item</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>		0.00 ✓
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>		

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

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

FOR LINE NUMBER: PAGE 5 OF 7  
(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"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

<p><b>A. Henning, Matthew</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>		<p>Date of Receipt MM / DD / YYYY 10 / 27 / 2020</p>
<p>Mailing Address 224 Evelyn Dr. City: Pleasant Hill State: CA Zip Code: 94523</p>		<p>Amount of Each Receipt this Period 40.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		<p><input type="checkbox"/> Memo Item</p>
<p>Name of Employer (for Individual): Sailors' Union of the Pacific Occupation (for Individual): Vice President</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 280.00</p>
<p><b>B. Lundberg, Gunnar</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>		<p>Date of Receipt MM / DD / YYYY</p>
<p>Mailing Address 2245 18th Street, #1 City: San Francisco State: CA Zip Code: 94107</p>		<p>Amount of Each Receipt this Period 0.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		<p><input type="checkbox"/> Memo Item</p>
<p>Name of Employer (for Individual): retired Occupation (for Individual)</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Aggregate Year-to-Date ▼ 200.00</p>
<p><b>C. Mercer, David</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p>		<p>Date of Receipt MM / DD / YYYY</p>
<p>Mailing Address 1050 Bishop St. #173 City: Honolulu State: HI Zip Code: 96813</p>		<p>Amount of Each Receipt this Period 0.00</p>
<p>FEC ID number of contributing federal political committee. C</p>		<p><input type="checkbox"/> Memo Item</p>
<p>Name of Employer (for Individual): Matson Occupation (for Individual): Seaman</p>		
<p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)</p>		<p>Aggregate Year-to-Date ▼ 200.00</p>
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....</p>		<p>40.00</p>
<p><b>TOTAL</b> This Period (last page this line number only).....</p>		

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

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

FOR LINE NUMBER: PAGE 6 OF 7  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

<p><b>A. Thompson, Bruce</b></p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 1970 N. Leslie St. - PMB 144</p> <p>City: <b>Pahrump</b> State: <b>NV</b> Zip Code: <b>89060-3678</b></p> <p>FEC ID number of contributing federal political committee: <b>C</b></p> <p>Name of Employer (for Individual): <b>retired</b> Occupation (for Individual): <b>seaman</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>200 00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period <b>0 00</b> ✓</p> <p><input type="checkbox"/> Memo Item</p>	
<p><b>B. Williamson, William</b> ✓</p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 31003 14th Ave., S Apt G2</p> <p>City: <b>Federal Way</b> State: <b>WA</b> Zip Code: <b>98003</b></p> <p>FEC ID number of contributing federal political committee: <b>C</b></p> <p>Name of Employer (for Individual): <b>American President Lines</b> Occupation (for Individual): <b>seaman</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>200 00</b></p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p> <p>Amount of Each Receipt this Period <b>0 00</b> ✓</p> <p><input type="checkbox"/> Memo Item</p>	
<p><b>C. Winter, Peter</b> ✓</p> <p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name</p> <p>Mailing Address 23 Ivy Drive</p> <p>City: <b>Orinda</b> State: <b>CA</b> Zip Code: <b>94563</b></p> <p>FEC ID number of contributing federal political committee: <b>C</b></p> <p>Name of Employer (for Individual): <b>American President Lines</b> Occupation (for Individual): <b>seaman</b></p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <b>350 00</b> ✓</p>			<p>Date of Receipt M M / D D / Y Y Y Y Y Y</p> <p><b>10 / 01 / 2020</b> ✓</p> <p>Amount of Each Receipt this Period <b>150 00</b> ✓</p> <p><input type="checkbox"/> Memo Item</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional).....▶</p>			<p><b>150 00</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only).....▶</p>			<p></p>	

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

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

FOR LINE NUMBER: PAGE 7 OF 7  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. Go, Christopher</b>			Date of Receipt MM / DD / YYYY 10 / 01 / 2020		
Mailing Address 502 Puget Place, S.E.			Amount of Each Receipt this Period 200 00		
City Pacific	State WA	Zip Code 98047	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date 200 00		
Name of Employer (for Individual) American President Lines		Occupation (for Individual) seaman	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. Linn, Benjamin</b>			Date of Receipt MM / DD / YYYY 10 / 01 / 2020		
Mailing Address 1221 Evergreen Pk Dr. SW, Apt H2			Amount of Each Receipt this Period 200 00		
City Olympia	State WA	Zip Code 98502	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date 200 00		
Name of Employer (for Individual) American President Lines		Occupation (for Individual) seaman	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. Pangan, Ricky</b>			Date of Receipt MM / DD / YYYY 11 / 13 / 2020		
Mailing Address 380 Lake Merced Blvd. #7			Amount of Each Receipt this Period 200 00		
City Daly City	State CA	Zip Code 94015	<input type="checkbox"/> Memo Item		
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date 200 00		
Name of Employer (for Individual) Matson		Occupation (for Individual) seaman	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		

<b>SUBTOTAL</b> of Receipts This Page (optional).....	600 00
<b>TOTAL</b> This Period (last page this line number only).....	1,690 00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 2		
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

**A.** Full Name (Last, First, Middle Initial)  
**Mark Kelly for Senate** ✓

Mailing Address  
**P. O. Box 27202**

City **Tucson** State **AZ** Zip Code **85726**

Purpose of Disbursement  011 Category/Type

Candidate Name  
**Mark Kelly**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **AZ** District:

Date of Disbursement  
MM / DD / YYYY  
**10 / 19 / 2020**

FEC Identification Number  
**C 00696526**

Amount of Each Disbursement this Period  
**1 000 00**

Memo Item

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

Mailing Address  
**P. O. Box 1316**

City **Springfield** State **OR** Zip Code **97477**

Purpose of Disbursement  011 Category/Type

Candidate Name  
**Peter DeFazio**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **OR** District: **4**

Date of Disbursement  
MM / DD / YYYY  
**10 / 19 / 2020**

FEC Identification Number  
**C 00215905**

Amount of Each Disbursement this Period  
**1 000 00**

Memo Item

**C.** Full Name (Last, First, Middle Initial)  
**TJ Cox for Congress**

Mailing Address  
**P. O. Box 804**

City **Selma** State **CA** Zip Code **93662**

Purpose of Disbursement  011 Category/Type

Candidate Name  
**Terrance John Cox**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: **CA** District: **21**

Date of Disbursement  
MM / DD / YYYY  
**10 / 19 / 2020**

FEC Identification Number  
**C 00648956**

Amount of Each Disbursement this Period  
**500 00**

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ **2 500 00**

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

2020 RELEASE UNDER E.O. 14176

**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 2 OF 2
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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)  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

**A.**

Full Name (Last, First, Middle Initial)  
**Strickland for Washington**

Date of Disbursement  
MM / DD / YYYY  
**11 / 03 / 2020**

Mailing Address  
**1625 East 72nd Street, ste 700-139**

City: **Tacoma** State: **WA** Zip Code: **98404**

Purpose of Disbursement

Candidate Name  
**Marilyn Strickland**

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

State: **WA** District: **10**

FEC Identification Number  
**C 00732826**

Amount of Each Disbursement this Period  
**500 00**

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

State: District:

FEC Identification Number  
**C**

Amount of Each Disbursement this Period

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ **500 00**

**TOTAL** This Period (last page this line number only).....▶ **3000 00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 1 OF 1		
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 26	<input type="checkbox"/> 27
	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input checked="" type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
**SAILORS' UNION OF THE PACIFIC POLITICAL FUND**

**A.** Full Name (Last, First, Middle Initial)  
Skinner for Senate (FPPC #1392359)

Date of Disbursement  
MM / DD / YYYY  
10 / 19 / 2020

Mailing Address  
Deane & Co. 1787 Tribute Rd, Suite K

City Sacramento State CA Zip Code 95815

Purpose of Disbursement  
Category/Type: **011**

Candidate Name  
Nancy Skinner

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
\_\_\_\_\_ 250.00

Memo Item

**B.** Full Name (Last, First, Middle Initial)  
No On Prop 22, sponsored by Labor Organizations (ID# 1424537)

Date of Disbursement  
MM / DD / YYYY  
10 / 19 / 2020

Mailing Address  
600 Grand Avenue, Suite 410

City Oakland State CA Zip Code 94610

Purpose of Disbursement  
Category/Type: **011**

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
\_\_\_\_\_ 1,000.00

Memo Item

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

Date of Disbursement  
MM / DD / YYYY

Mailing Address

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Purpose of Disbursement  
Category/Type: **011**

Candidate Name

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

State: \_\_\_\_\_ District: \_\_\_\_\_

FEC Identification Number  
**C**

Amount of Each Disbursement this Period  
\_\_\_\_\_

Memo Item

**SUBTOTAL** of Disbursements This Page (optional).....▶ 1,250.00

**TOTAL** This Period (last page this line number only).....▶ 1,250.00



Federal Election Commission  
**ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS**  
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked Date of Receipt
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 12/1/20
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
	Next Business Day Delivery <input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

PREPARER *SPM* 12/1/20  
 (3/2015) DATE PREPARED

NON-FUNCTIONAL COMMENT