

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) Three Park Place
 Check if different than previously reported. (ACC)
Annapolis MD 21401

2. **FEC IDENTIFICATION NUMBER** C00012476
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 09 01 2008 through 09 30 2008

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 Assistant Treasurer Patrick R. Perno

Signature of Treasurer Electronically Filed by Assistant Treasurer Patrick R. Perno Date 06 01 2009

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

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
United Association Political Education Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		1410554.13
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1525144.33									
(c) Total Receipts (from Line 19)	269832.56	1543764.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1794976.89	2954318.97								
7. Total Disbursements (from Line 31)	233810.54	1393152.62								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1561166.35	1561166.35								
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
999 E street, NW
Washington, DC 20463

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
United Association Political Education Committee

Report Covering the Period: From:

M	M
0	9

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	4400.00	4600.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	96128.88	1289204.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)	100528.88	1293804.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	168600.00	228600.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	269128.88	1522404.13
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	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	703.68	6360.71
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))	269832.56	1543764.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	269832.56	1543764.84

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	75.00	10777.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	75.00	10777.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	204500.00	985100.00
24. Independent Expenditure (use Schedule E)	26735.54	83024.82
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	2500.00	314250.00
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))..	233810.54	1393152.62
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	233810.54	1393152.62

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	269128.88	1522404.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	269128.88	1522404.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	75.00	10777.80
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	75.00	10777.80

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 36
(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)
United Association Political Education Committee

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

Mailing Address 22058 Roosevelt Rd

City State Zip Code
South Bend IN 46614

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
09 / 12 / 2008

Transaction ID: SA11AI.11409

Amount of Each Receipt this Period
200.00

Donation

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

Mailing Address 116 Detonti Drive

City State Zip Code
Maumelle AR 72113

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
200.00

Date of Receipt
09 / 12 / 2008

Transaction ID: SA11AI.11411

Amount of Each Receipt this Period
200.00

Donation

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

Mailing Address 10255 Pontiac Lake Rd

City State Zip Code
White Lake Twsp MI 48386

FEC ID number of contributing federal political committee. C

Name of Employer UA Local 98 Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1000.00

Date of Receipt
09 / 30 / 2008

Transaction ID: SA11AI.11384

Amount of Each Receipt this Period
1000.00

Donation

SUBTOTAL of Receipts This Page (optional) 1400.00

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 7 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

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

Mailing Address PO Box 92

City State Zip Code
Cassopolis MI 49031

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

Name of Employer N/A Occupation Pipefitter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 09 / 12 / 2008
Transaction ID: SA11AI.11413
Amount of Each Receipt this Period: 200.00
Donation

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

Mailing Address 9550 W. Sahara #1141

City State Zip Code
Las Vegas NV 89117

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

Name of Employer N/A Occupation Pipefitter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1000.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: SA11AI.11388
Amount of Each Receipt this Period: 1000.00
Donation

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

Mailing Address 633 14th street, ne

City State Zip Code
Washington DC 20002

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

Name of Employer United Association Occupation Admin

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt: 09 / 30 / 2008
Transaction ID: SA11AI.11356
Amount of Each Receipt this Period: 200.00
Donation

SUBTOTAL of Receipts This Page (optional) ► 1400.00

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 8 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

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

Mailing Address 12941 S. Sunset Dr

City State Zip Code
Haubstadt IN 47639

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 12 / 2008
Transaction ID: SA11AI.11415

Amount of Each Receipt this Period 200.00

Donation

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

Mailing Address PO Box 4341

City State Zip Code
Gadsden AL 35904

FEC ID number of contributing federal political committee. C

Name of Employer UA Local 498 Occupation Pipefitter

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 30 / 2008
Transaction ID: SA11AI.11364

Amount of Each Receipt this Period 200.00

Donation

C. Full Name (Last, First, Middle Initial)
James R. Scheetz

Mailing Address 22405 New Road

City State Zip Code
South Bend IN 46614

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation N/A

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 200.00

Date of Receipt 09 / 12 / 2008
Transaction ID: SA11AI.11417

Amount of Each Receipt this Period 200.00

Donation

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)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 36

(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.

Full Name (Last, First, Middle Initial)
Kirk Smith

Mailing Address 3764 Colliers Drive

City State Zip Code
Edgewater MD 21037

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

Name of Employer Occupation
United Association Director of Organizing

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.11369

Amount of Each Receipt this Period

500.00

Donation

B.

Full Name (Last, First, Middle Initial)
billy snyder

Mailing Address 1614 20th avenue

City State Zip Code
northport AL 35476

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

Name of Employer Occupation
Local 372 Pipefitter

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2008

Transaction ID: SA11AI.11362

Amount of Each Receipt this Period

500.00

Donation

SUBTOTAL of Receipts This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

4400.00

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
Plumbers & Pipefitters Local 25 PAC

Mailing Address 1228 Third Avenue

City State Zip Code
Rock Island IL 61201

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
2100.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11360

Amount of Each Receipt this Period
2100.00

Donation

B. Full Name (Last, First, Middle Initial)
Plumbers & Pipefitters Local 447 PAC

Mailing Address 5841 Newman Court

City State Zip Code
Sacramento CA 95819

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11390

Amount of Each Receipt this Period
15000.00

Donation

C. Full Name (Last, First, Middle Initial)
PLUMBERS & PIPEFITTERS LOCAL UNION NO 522 POLITICAL ACTION FUND

Mailing Address 1317 BERRY BLVD

City State Zip Code
LOUISVILLE KY 40215

FEC ID number of contributing federal political committee. **C** C00347500

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11395

Amount of Each Receipt this Period
10000.00

Donation

SUBTOTAL of Receipts This Page (optional) ► **27100.00**

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 11 / 36
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
PLUMBERS & STEAMFITTERS LOCAL 22 PAC INC

Mailing Address 3651 CALIFORNIA ROAD

City State Zip Code
ORCHARD PARK NY 14127

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11C.11358

Amount of Each Receipt this Period
5000.00

Donation

B. Full Name (Last, First, Middle Initial)
PLUMBERS AND PIPEFITTERS LOCAL UNION 51 POLITICAL ACTION COMMITTEE

Mailing Address 11 HEMINGWAY DRIVE

City State Zip Code
EAST PROVIDENCE RI 02915

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11C.11377

Amount of Each Receipt this Period
5000.00

Donation

C. Full Name (Last, First, Middle Initial)
PLUMBERS AND STEAMFITTERS LOCAL NO 73 FEDERAL PAC FUND

Mailing Address PO BOX 911

City State Zip Code
OSWEGO NY 13126

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1500.00

Date of Receipt
MM / DD / YYYY
09 / 30 / 2008

Transaction ID: SA11C.11381

Amount of Each Receipt this Period
1500.00

Donation

SUBTOTAL of Receipts This Page (optional) ► **11500.00**

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 12 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
Plumbers Local 1 PAC

Mailing Address 158-29 Cross Bay Boulevard

City State Zip Code
Howard Beach NY 11414

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
25000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11366

Amount of Each Receipt this Period
25000.00

Donation

B. Full Name (Last, First, Middle Initial)
PLUMBERS LOCAL 519 POLITICAL ACTION COMMITTEE

Mailing Address 14105 N.W. 58TH COURT

City State Zip Code
MIAMI LAKES FL 33014

FEC ID number of contributing federal political committee. **C** C00143362

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
30000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11397

Amount of Each Receipt this Period
30000.00

Donation

C. Full Name (Last, First, Middle Initial)
Plumbers Local 690 PAC

Mailing Address 2791 Southampton Road

City State Zip Code
Philadelphia PA 19154

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	3	0	/	2	0	0	8

Transaction ID: SA11C.11371

Amount of Each Receipt this Period
5000.00

Donation

SUBTOTAL of Receipts This Page (optional) ► **60000.00**

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 13 / 36
 (check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
PLUMBERS LOCAL 98 POLITICAL ACTION COMMITTEE

Mailing Address 555 HORACE BROWN DRIVE

City State Zip Code
MADISON HEIGHTS MI 48071

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: SA11C.11393

Amount of Each Receipt this Period
1500.00

Donation

B. Full Name (Last, First, Middle Initial)
PLUMBERS LOCAL UNION NO. 27 PAC

Mailing Address 1040 Montour West Industrial Park

City State Zip Code
Coraopolis PA 15108

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 5000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: SA11C.11361

Amount of Each Receipt this Period
5000.00

Donation

C. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 602 COPE COMMITTEE

Mailing Address 8700 ASHWOOD DRIVE 2ND FLOOR

City State Zip Code
CAPITOL HEIGHTS MD 20743

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 3500.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008

Transaction ID: SA11C.11399

Amount of Each Receipt this Period
3500.00

Donation

SUBTOTAL of Receipts This Page (optional) ► **10000.00**

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 14 / 36
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
UA LOCAL 38 COMMITTEE ON POLITICAL EDUCATION
Mailing Address 1621 MARKET STREET

City State Zip Code
SAN FRANCISCO CA 94103

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008
Transaction ID: SA11C.11367
 Amount of Each Receipt this Period
 10000.00
 Donation

B. Full Name (Last, First, Middle Initial)
UNITED ASSN JOURNEYMEN & APPRENT OF PLUMB & PIPEFITTING IND LOCAL 322 COMM FOR POL
Mailing Address 534 SOUTH ROUTE 73
PO BOX 73

City State Zip Code
WINSLOW NJ 08095

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50000.00

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2008
Transaction ID: SA11C.11379
 Amount of Each Receipt this Period
 50000.00
 Donation

SUBTOTAL of Receipts This Page (optional) ► **60000.00**

TOTAL This Period (last page this line number only) ► **168600.00**

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 15 / 36	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt
	Mailing Address 1501 Pennsylvania Avenue, NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Washington	DC	20013
	FEC ID number of contributing federal political committee.		Transaction ID: SA17.11354
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer	Occupation	<input type="text" value="703.68"/>	
Interest			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="6360.71"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="703.68"/>
TOTAL This Period (last page this line number only)	<input type="text" value="703.68"/>

**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 16 / 36

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee

A.

Full Name (Last, First, Middle Initial)

Complete Campaigns, Inc.

Transaction ID: SB21B.11286

Date of Disbursement

^M	^M	/	^D	^D	/	^Y	^Y	^Y	^Y
0	9		0	9		2	0	0	8

Mailing Address 610 Gateway Center Way
Suite K

City San Diego State CA Zip Code 92102

Amount of Each Disbursement this Period

75.00

Purpose of Disbursement
Subscription

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

75.00

TOTAL This Period (last page this line number only)

75.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) Neil Abercrombie</p> <p>Mailing Address 300 Ala Moana Blvd</p> <p>City Honolulu State HI Zip Code 96850</p> <p>Purpose of Disbursement As disclosed in July 20th monthly report</p> <p>Candidate Name NEIL ABERCROMBIE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11348 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) Neil Abercrombie</p> <p>Mailing Address 300 Ala Moana Blvd</p> <p>City Honolulu State HI Zip Code 96850</p> <p>Purpose of Disbursement Redesignation to General election</p> <p>Candidate Name NEIL ABERCROMBIE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11349 Date of Disbursement 09 / 30 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) ANNE BARTH</p> <p>Mailing Address PO BOX 2151</p> <p>City CHARLESTON State WV Zip Code 25328</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name ANNE BARTH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11321 Date of Disbursement 09 / 16 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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 Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 18 / 36

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) SHELLEY BERKLEY</p> <p>Mailing Address 3069 CONQUISTA CT</p> <p>City LAS VEGAS State NV Zip Code 89121</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name SHELLEY BERKLEY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11291</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) FREDRICK C BOUCHER</p> <p>Mailing Address 195 PARK STREET PO BOX 2000</p> <p>City ABINGDON State VA Zip Code 24210</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name FREDERICK C BOUCHER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 09</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11306</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) F. A JR. BOYD</p> <p>Mailing Address P.O. BOX 15703</p> <p>City TALLAHASSEE State FL Zip Code 32317</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name F. A JR. BOYD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11337</p> <p>Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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)

PAGE 19 / 36

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) JAMES EDWARD BRYAN	Transaction ID: SB23.11339
	Mailing Address 8321 STOKES RD	Date of Disbursement 09 / 25 / 2008
	City LAUREL HILL State FL Zip Code 32567	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name JAMES EDWARD BRYAN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 01	

B.	Full Name (Last, First, Middle Initial) DONALD J CAZAYOUX	Transaction ID: SB23.11311
	Mailing Address 803 E MAIN ST	Date of Disbursement 09 / 09 / 2008
	City NEW ROADS State LA Zip Code 70760	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name DONALD J CAZAYOUX	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: LA District: 06	

C.	Full Name (Last, First, Middle Initial) THEODORE S CELESTE	Transaction ID: SB23.11280
	Mailing Address 1241 LINCOLN RD	Date of Disbursement 09 / 08 / 2008
	City GRANDVIEW HEIGHTS State OH Zip Code 43212	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name THEODORE S CELESTE	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: OH District: 00	

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial) GERRY CONNOLLY <hr/> Mailing Address PO BOX 563 <hr/> City MERRIFIELD State VA Zip Code 22116 <hr/> Purpose of Disbursement Transfer Candidate Name GERRY CONNOLLY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 11 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11309 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

B. Full Name (Last, First, Middle Initial) CT DEMOCRATIC STATE CENTRAL COMMITTEE <hr/> Mailing Address 179 Allyn Street <hr/> City Hartford State CT Zip Code 06103 <hr/> Purpose of Disbursement Transfer Candidate Name CT DEMOCRATIC STATE CENTRAL COMMITTEE Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11418 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Category/ Type

C. Full Name (Last, First, Middle Initial) WILLIAM S DAY <hr/> Mailing Address 7700 FRYTOWN RD <hr/> City WARRENTON State VA Zip Code 20187 <hr/> Purpose of Disbursement Transfer Candidate Name WILLIAM S DAY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11292 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 9 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	7000.00
TOTAL This Period (last page this line number only) ▶	[]

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) Democratic Senatorial Campaign Committee</p> <p>Mailing Address 430 South Capitol Street</p> <p>City Washington State DC Zip Code 20003</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.11420</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="15000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) JILL T DERBY</p> <p>Mailing Address 1298 KINGSBURY GRADE</p> <p>City GARDNERVILLE State NV Zip Code 89460</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JILL T DERBY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: NV District: 02</p>	<p>Transaction ID: SB23.11290</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="09"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2500.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) JANE BALLARD DYER</p> <p>Mailing Address PO BOX 1000</p> <p>City EASLEY State SC Zip Code 29641</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JANE BALLARD DYER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: SC District: 03</p>	<p>Transaction ID: SB23.11263</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="08"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="22500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial) GEORGE BARR FEARING <hr/> Mailing Address 2415 W FALLS AVE <hr/> City KENNEWICK State WA Zip Code 99336 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name GEORGE BARR FEARING <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 04 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11273 Date of Disbursement M M / D D / Y Y Y Y 09 / 04 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JUDITH FEDER <hr/> Mailing Address 1514 HARDWOOD LANE <hr/> City MCLEAN State VA Zip Code 20001 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name JUDITH FEDER <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 10 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11308 Date of Disbursement M M / D D / Y Y Y Y 09 / 09 / 2008
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) G. WILLIAM (BIL FOSTER) <hr/> Mailing Address 39w341 Preston Circle <hr/> City Geneva State IL Zip Code 60134 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name G. WILLIAM (BIL FOSTER) <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 14 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11282 Date of Disbursement M M / D D / Y Y Y Y 09 / 08 / 2008
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) THOMAS RICHARD HARKIN	Transaction ID: SB23.11330 Date of Disbursement 09 / 25 / 2008
	Mailing Address 528 N 43RD ST #85	Amount of Each Disbursement this Period 5000.00
	City CUMMING State IA Zip Code 50061	
	Purpose of Disbursement Transfer	
	Candidate Name THOMAS RICHARD HARKIN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JAMES KENNETH HARLAN	Transaction ID: SB23.11335 Date of Disbursement 09 / 25 / 2008
	Mailing Address 59002 PINE BAY LANE	Amount of Each Disbursement this Period 5000.00
	City LACOMBE State LA Zip Code 70455	
	Purpose of Disbursement Transfer	
	Candidate Name JAMES KENNETH HARLAN	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) ANITA RUTH HARTKE	Transaction ID: SB23.11302 Date of Disbursement 09 / 09 / 2008
	Mailing Address 3192 RANCELEE WAY	Amount of Each Disbursement this Period 1000.00
	City AMISSVILLE State VA Zip Code 20106	
	Purpose of Disbursement transfer	
	Candidate Name ANITA RUTH HARTKE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 07	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) ALCEE L HASTINGS	Transaction ID: SB23.11327 Date of Disbursement 09 / 23 / 2008
	Mailing Address 2235 RAYBURN OFFICE BUILDING	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20515	
	Purpose of Disbursement Transfer	Category/Type
	Candidate Name ALCEE L HASTINGS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 23	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) FRED L III PHD JOHNSON	Transaction ID: SB23.11319 Date of Disbursement 09 / 11 / 2008
	Mailing Address 120 W 28TH	Amount of Each Disbursement this Period 5000.00
	City HOLLAND State MI Zip Code 49423	
	Purpose of Disbursement Transfer	Category/Type
	Candidate Name FRED L III PHD JOHNSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 02	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) PAUL E KANJORSKI	Transaction ID: SB23.11315 Date of Disbursement 09 / 11 / 2008
	Mailing Address 103 South Hanover Street	Amount of Each Disbursement this Period 5000.00
	City Nanticoke State PA Zip Code 18634	
	Purpose of Disbursement Transfer	Category/Type
	Candidate Name PAUL E KANJORSKI	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

15000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) JOHN FORBES KERRY</p> <p>Mailing Address 19 LOUISBURG SQUARE</p> <p>City BOSTON State MA Zip Code 02106</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JOHN FORBES KERRY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11269</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) JOHN FORBES KERRY</p> <p>Mailing Address 19 LOUISBURG SQUARE</p> <p>City BOSTON State MA Zip Code 02106</p> <p>Purpose of Disbursement Void check 7096 dated 7/9/08</p> <p>Candidate Name JOHN FORBES KERRY</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11400</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period -5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) MARY L LANDRIEU</p> <p>Mailing Address 607 14TH STREET NW SUITE 800</p> <p>City WASHINGTON State DC Zip Code 20005</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name MARY L LANDRIEU</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11270</p> <p>Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

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
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) JAMES R LANGEVIN	Transaction ID: SB23.11347
	Mailing Address 1270 IVES ROAD	Date of Disbursement 09 / 19 / 2008
	City WARWICK State RI Zip Code 02886	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name JAMES R LANGEVIN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: RI District: 02	

B.	Full Name (Last, First, Middle Initial) RICK LARSEN	Transaction ID: SB23.11329
	Mailing Address P.O. Box 326	Date of Disbursement 09 / 25 / 2008
	City Everett State WA Zip Code 98206	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name RICK LARSEN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: WA District: 02	

C.	Full Name (Last, First, Middle Initial) JOHN B LARSON	Transaction ID: SB23.11265
	Mailing Address 1887 OLD MAIN STREET	Date of Disbursement 09 / 02 / 2008
	City EAST HARTFORD State CT Zip Code 06108	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name JOHN B LARSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: CT District: 01	

SUBTOTAL of Disbursements This Page (optional)	12500.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) DANIEL B MR. MAFFEI	Transaction ID: SB23.11267 Date of Disbursement 09 / 02 / 2008
	Mailing Address 15 Pebble Hill N	
	City DeWitt State NY Zip Code 13214	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	
	Candidate Name DANIEL B MR. MAFFEI	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) DANIEL B MR. MAFFEI	Transaction ID: SB23.11289 Date of Disbursement 09 / 09 / 2008
	Mailing Address 15 Pebble Hill N	
	City DeWitt State NY Zip Code 13214	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	
	Candidate Name DANIEL B MR. MAFFEI	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) JAMES FRANCIS MARTIN	Transaction ID: SB23.11316 Date of Disbursement 09 / 11 / 2008
	Mailing Address 30 5TH STREET NE #901	
	City ATLANTA State GA Zip Code 30303	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	
	Candidate Name JAMES FRANCIS MARTIN	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) CAROLYN MCCARTHY</p> <p>Mailing Address P.O. Box 190</p> <p>City Mineola State NY Zip Code 11501</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name CAROLYN MCCARTHY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11276</p> <p>Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>B. Full Name (Last, First, Middle Initial) BETTY MCCOLLUM</p> <p>Mailing Address PO BOX 14131</p> <p>City ST PAUL State MN Zip Code 55114</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name BETTY MCCOLLUM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11342</p> <p>Date of Disbursement 09 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) MICHAEL E. MR. MCMAHON</p> <p>Mailing Address 66 Arnold Street</p> <p>City Staten Island State NY Zip Code 10301</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name MICHAEL E. MR. MCMAHON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11278</p> <p>Date of Disbursement 09 / 04 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

14000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) ANDREA RUTH MILLER</p> <p>Mailing Address 14004 SUMMORSEEDGE TORRACE</p> <p>City CHESTORFIELD State VA Zip Code 23832</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name ANDREA RUTH MILLER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11296</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) WALTER CLIFFORD MINNICK</p> <p>Mailing Address 1020 MAIN STREET SUITE 340</p> <p>City BOISE State ID Zip Code 83702</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name WALTER CLIFFORD MINNICK</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ID District: 01</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11261</p> <p>Date of Disbursement 09 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) JAMES P JR MORAN</p> <p>Mailing Address 175 CHAIN BRIDGE ROAD</p> <p>City ARLINGTON State VA Zip Code 22101</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JAMES P JR MORAN</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 08</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11304</p> <p>Date of Disbursement 09 / 09 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

7000.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) DAVID RONALD MUSGROVE	Transaction ID: SB23.11341 Date of Disbursement
	Mailing Address 105 ADDINGTON PLACE	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City MADISON State MS Zip Code 39110	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="5000.00"/>
	Candidate Name DAVID RONALD MUSGROVE	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MS District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) THOMAS STUART PRICE PERRIELLO	Transaction ID: SB23.11298 Date of Disbursement
	Mailing Address BOX 306	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City IVY State VA Zip Code 22945	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="1000.00"/>
	Candidate Name THOMAS STUART PRICE PERRIELLO	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 05	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) SALAM "SAM" RASOUL	Transaction ID: SB23.11300 Date of Disbursement
	Mailing Address BOX 126	<input type="text" value="09"/> / <input type="text" value="09"/> / <input type="text" value="2008"/>
	City BLUE RIDGE State VA Zip Code 24064	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="1000.00"/>
	Candidate Name SALAM "SAM" RASOUL	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 06	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) LAURA RICHARDSON	Transaction ID: SB23.11328 Date of Disbursement 09 / 23 / 2008
	Mailing Address 1212 S VICTORY BLVD	Amount of Each Disbursement this Period 5000.00
	City BURBANK State CA Zip Code 91502	
	Purpose of Disbursement Transfer	
	Candidate Name LAURA RICHARDSON	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 37	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN DAVISON IV ROCKEFELLER	Transaction ID: SB23.11323 Date of Disbursement 09 / 16 / 2008
	Mailing Address 1515 BARBERRY LANE	Amount of Each Disbursement this Period 5000.00
	City CHARLESTON State WV Zip Code 25314	
	Purpose of Disbursement Transfer	
	Candidate Name JOHN DAVISON IV ROCKEFELLER	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BERNARD SANDERS	Transaction ID: SB23.11275 Date of Disbursement 09 / 04 / 2008
	Mailing Address 72 KILLARNEY DRIVE	Amount of Each Disbursement this Period 5000.00
	City BURLINGTON State VT Zip Code 05401	
	Purpose of Disbursement Transfer	
	Candidate Name BERNARD SANDERS	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial) ROBERT C 'BOBBY' SCOTT <hr/> Mailing Address 7501 RIVER ROAD 2G <hr/> City NEWPORT NEWS State VA Zip Code 23607 <hr/> Purpose of Disbursement Transfer	Transaction ID: SB23.11294 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 1000.00	
		Candidate Name ROBERT C 'BOBBY' SCOTT Category/ Type
		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 03
		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) JEANNE SHAHEEN <hr/> Mailing Address 73 PERKINS ROAD <hr/> City MADBURY State NH Zip Code 03823 <hr/> Purpose of Disbursement Transfer	Transaction ID: SB23.11314 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 5000.00	
		Candidate Name JEANNE SHAHEEN Category/ Type
		Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 00
		Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) CAROL SHEA-PORTER <hr/> Mailing Address P.O. Box 453 <hr/> City Rochester State NH Zip Code 03866 <hr/> Purpose of Disbursement Transfer	Transaction ID: SB23.11312 Date of Disbursement 09 / 09 / 2008 <hr/> Amount of Each Disbursement this Period 5000.00	
		Candidate Name CAROL SHEA-PORTER Category/ Type
		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01
		Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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)
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FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) BART STUPAK	Transaction ID: SB23.11332
	Mailing Address 817 NINTH AVENUE PO BOX 156	Date of Disbursement MM / DD / YYYY 09 / 25 / 2008
	City MENOMINEE State MI Zip Code 49858	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name BART STUPAK	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: MI District: 01	
B.	Full Name (Last, First, Middle Initial) DINA TITUS	Transaction ID: SB23.11287
	Mailing Address 1637 TRAVOIS CIRCLE	Date of Disbursement MM / DD / YYYY 09 / 09 / 2008
	City LAS VEGAS State NV Zip Code 89119	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name DINA TITUS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NV District: 03	

SUBTOTAL of Disbursements This Page (optional) ▶

10000.00

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

204500.00

**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)

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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

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

NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) Harry Gravell, Jr.			Transaction ID: SB29.11401	
	Mailing Address PO Box 5651			Date of Disbursement 09 / 25 / 2008	
	City Wilmington	State DE	Zip Code 19808	Amount of Each Disbursement this Period 2500.00	
	Purpose of Disbursement DNC Expense		Category/ Type		
	Candidate Name				
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
	State:	District:			

SUBTOTAL of Disbursements This Page (optional)	▶	2500.00
TOTAL This Period (last page this line number only)	▶	2500.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) United Association Political Education Committee		FEC IDENTIFICATION NUMBER C C00012476	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Clear Images		Date M M / D D / Y Y Y Y 0 9 / 0 2 / 2 0 0 8	
Mailing Address 121 11th Street		Amount 26735.54	
City State Zip Code Toledo OH 43604		Transaction ID: SE.11406	
Purpose of Expenditure Mini-Billboards, Yard Signs		Office Sought: <input type="checkbox"/> House State: _____ <input type="checkbox"/> Senate District: _____ <input checked="" type="checkbox"/> Presidential	
Name of Federal Candidate supported or Opposed by expenditure: BARACK OBAMA		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Calendar Year-To-Date Per Election for Office Sought 83024.82		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	

(a) SUBTOTAL of Itemized Independent Expenditures	26735.54
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	26735.54
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.	
Assistant Treasurer Patrick R. Perno Signature	Date M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 0 9