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2008 OCT 14 AM 9:35

October 8, 2008

Federal Election Commission  
999 East Street, NW  
Washington, D.C. 20463

Re: Arkema Political Action Committee  
Identification No. C00182980

Dear Sir,

Enclosed is the October 15<sup>th</sup> Quarterly Report ,Q3, of Receipts and Disbursements (FEC Form 3X) for the Arkema Political Action Committee.

Regards,

A handwritten signature in cursive script that reads "Peter Johnsen".

Peter Johnsen  
APAC Treasurer

Writer's E-mail: [pete.Johnsen@arkema.com](mailto:pete.Johnsen@arkema.com)  
Writer's Phone: (215) 419-7626  
Writer's Fax: (215) 419-7455

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**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**ARKEMA POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 07 01 2008 To: <sup>M M / D D / Y Y Y Y</sup> 09 30 2008

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <sup>Y Y Y Y</sup> 2008		, 10,837.00
(b) Cash on Hand at Beginning of Reporting Period.....	, 13,929.00	
(c) Total Receipts (from Line 19).....	, 4,750.00	, 16,342.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	, 18,679.00	, 27,179.00
7. Total Disbursements (from Line 31).....	, 5,000.00	, 13,500.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	, 13,679.00	, 13,679.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	, , .	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	, , .	

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

**ARKEMA POLITICAL ACTION COMMITTEE**

Report Covering the Period: From: <sup>M M / D D / Y Y Y Y</sup> 07 01 2008 To: <sup>M M / D D / Y Y Y Y</sup> 09 30 2008

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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).....	2,252.00	7,187.00
(ii) Unitemized.....	2,498.00	9,155.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4,750.00	16,342.00
(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).....▶	4,750.00	16,342.00
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.....	.	.
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)).....▶	4,750.00	16,342.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4,750.00	16,342.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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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 .....	,	,
(ii) Non-Federal Share.....	,	,
(b) Other Federal Operating Expenditures .....	,	,
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	,	,
	0.	0.
22. Transfers to Affiliated/Other Party Committees.....	,	,
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	,	,
	5,000.00	13,500.00
24. Independent Expenditures (use Schedule E) .....	,	,
25. Coordinated Party Expenditures (2 U.S.C. §441a(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)).....	,	,
	0.	0.
29. Other Disbursements .....	,	,
30. Federal Election Activity (2 U.S.C. §431(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))....	,	,
	0.	0.
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	,	,
	5,000.00	13,500.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	,	,
	5,000.00	13,500.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	4,750.00	16,342.00
34. Total Contribution Refunds (from Line 28(d)) .....	,	,
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	4,750.00	16,342.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	,	,
37. Offsets to Operating Expenditures (from Line 15, page 3).....	,	,
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	,	,

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE / OF 6	
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16

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)  
**ARKEMA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. KAMEL, WILLIAM</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 240.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  <b>, 240.00</b>  <b>Bi-weekly PAYROLL DEDUCTIONS</b>
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>V.P. &amp; GENERAL COUNSEL</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 760.00</b>	

Full Name (Last, First, Middle Initial) <b>B. SHARP, DOUG</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 240.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  <b>, 240.00</b>  <b>Bi-weekly PAYROLL DEDUCTIONS</b>
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>GROUP PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 625.00</b>	

Full Name (Last, First, Middle Initial) <b>C. FLYNN, KAREN</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 150.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period  <b>, 150.00</b>
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>SR. DIRECTOR - RISK MANAGEMENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 490.00</b>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>, 630.00</b>
<b>TOTAL</b> This Period (last page this line number only).....▶	<b>, .</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 2 OF 6	
	<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

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)  
**ARKEMA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>REYHER, JAY</b>			Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>			Amount of Each Receipt this Period  <b>, , 80.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19103</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Bi-weekly PAYROLL DEDUCTIONS</b>
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>GROUP PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 420.00</b>	

B. Full Name (Last, First, Middle Initial) <b>KATZ, EMANUEL</b>			Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>			Amount of Each Receipt this Period  <b>, , 150.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19103</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Bi-weekly PAYROLL DEDUCTIONS</b>
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>GROUP PRESIDENT</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 475.00</b>	

C. Full Name (Last, First, Middle Initial) <b>KEOUGH, MIKE</b>			Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>			Amount of Each Receipt this Period  <b>, , 120.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>18940</b>	
FEC ID number of contributing federal political committee. <b>C</b>			<b>Bi-weekly PAYROLL DEDUCTIONS</b>
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>CIO</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 380.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>, , 350.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, ,</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 3 OF 6				
	<input checked="" type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 16	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)  
**ARKEMA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>ROWE, RICHARD</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 120.00</b>
City <b>PHILADELPHIA</b>	State <b>PA</b>	
Zip Code <b>19103</b>		Amount of Each Receipt this Period  <b>, 120.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>GROUP PRESIDENT</b>	Amount of Each Receipt this Period  <b>Bi-WEEKLY PAYROLL DEDUCTIONS</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 380.00</b>	

B. Full Name (Last, First, Middle Initial) <b>TURLEY, WENDAL</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>P.O. BOX 1427</b>		Amount of Each Receipt this Period  <b>, 120.00</b>
City <b>BEAUMONT</b>	State <b>TX</b>	
Zip Code <b>77704</b>		Amount of Each Receipt this Period  <b>, 120.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>PLANT MANAGER</b>	Amount of Each Receipt this Period  <b>Bi-WEEKLY PAYROLL DEDUCTIONS</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 380.00</b>	

C. Full Name (Last, First, Middle Initial) <b>GLOVER, CHRIS</b>		Date of Receipt M M / D D / Y Y Y Y
Mailing Address <b>128 OLD BRICKYARD LANE</b>		Amount of Each Receipt this Period  <b>, 240.00</b>
City <b>KENSINGTON</b>	State <b>CT</b>	
Zip Code <b>06037</b>		Amount of Each Receipt this Period  <b>, 240.00</b>
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>PLANT MANAGER</b>	Amount of Each Receipt this Period  <b>Bi-weekly PAYROLL DEDUCTIONS</b>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 490.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	<b>, 480.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, ,</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 4 OF 6	
	<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)  
**ARKEMA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>WARD LAW, CHARLES</b>			Date of Receipt
Mailing Address <b>2000 MARKET STREET</b>			M M / D D / Y Y Y Y
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19103</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>			, , 150.00
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>VP SUPPLY CHAIN</b>	Bi-weekly PAYROLL DEDUCTIONS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 350.00</b>	

B. Full Name (Last, First, Middle Initial) <b>BELL, JAMES</b>			Date of Receipt
Mailing Address <b>2000 MARKET STREET</b>			M M / D D / Y Y Y Y
City <b>PHILADELPHIA</b>	State <b>PA</b>	Zip Code <b>19103</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>			, , 90.00
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>DIRECTOR COMMUNICATIONS</b>	Bi-weekly PAYROLL DEDUCTIONS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 285.00</b>	

C. Full Name (Last, First, Middle Initial) <b>HALL, JEFF</b>			Date of Receipt
Mailing Address <b>4444 INDUSTRIAL PARKWAY</b>			M M / D D / Y Y Y Y
City <b>CALVERT CITY</b>	State <b>KY</b>	Zip Code <b>42029</b>	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee. <b>C</b>			, , 90.00
Name of Employer <b>ARKEMA INC.</b>		Occupation <b>PLANT MANAGER</b>	Bi-weekly PAYROLL DEDUCTIONS
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>		Aggregate Year-to-Date <b>, , 285.00</b>	

SUBTOTAL of Receipts This Page (optional).....▶	, , 330.00
TOTAL This Period (last page this line number only).....▶	, , .

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 5 OF 6	
	<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)  
**ARKEMA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>DIRKK, RYAN</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address <b>900 FIRST AVE</b>		Amount of Each Receipt this Period  <b>, 150.00</b>	
City <b>KING OF PRUSSIA</b>	State <b>PA</b>		Zip Code <b>19406</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>VP R&amp;D</b>	<b>Bi-weekly PAYROLL DEDUCTIONS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 250.00</b>		

B. Full Name (Last, First, Middle Initial) <b>HARMAN, LOUISE</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 72.00</b>	
City <b>PHILADELPHIA</b>	State <b>PA</b>		Zip Code <b>19103</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>DIRECTOR, BENEFITS</b>	<b>Bi-weekly PAYROLL DEDUCTIONS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 210.00</b>		

C. Full Name (Last, First, Middle Initial) <b>GIANGRASSO, CHRIS</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 120.00</b>	
City <b>PHILADELPHIA</b>	State <b>PA</b>		Zip Code <b>19103</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>VP HR</b>	<b>Bi-weekly PAYROLL DEDUCTIONS</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <b>CONTRIBUTION</b>	Aggregate Year-to-Date <b>, 200.00</b>		

SUBTOTAL of Receipts This Page (optional).....▶	<b>, 342.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, .</b>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)		PAGE 6 OF 6	
	<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)  
**ARKEMA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. TILLES ERIC</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address <b>2000 MARKET STREET</b>		Amount of Each Receipt this Period  <b>, 120.00</b>  <b>Bi-weekly PAYROLL DEDUCTIONS</b>	
City <b>PHILADELPHIA</b>	State <b>PA</b>		Zip Code <b>19103</b>
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer <b>ARKEMA INC.</b>	Occupation <b>ATTORNEY-LABOR LAW</b>	Aggregate Year-to-Date ▼ <b>, 200.00</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ <b>CONTRIBUTION</b>			

Full Name (Last, First, Middle Initial) <b>B.</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period  <b>, , .</b>	
City	State		Zip Code
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation	Aggregate Year-to-Date ▼ <b>, , .</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C.</b>		Date of Receipt M M / D D / Y Y Y Y	
Mailing Address		Amount of Each Receipt this Period  <b>, , .</b>	
City	State		Zip Code
FEC ID number of contributing federal political committee. <b>C</b>			
Name of Employer	Occupation	Aggregate Year-to-Date ▼ <b>, , .</b>	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional).....▶	<b>, 120.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, 2,252.00</b>

28039852840

**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 / OF 2

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

**ARKEMA POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

A. <b>CORKER, BOB</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 24 / 2008</b>
Mailing Address <b>1015 STONEBRIDGE PARK DRIVE</b>		Amount of Each Disbursement this Period  <b>, 1,000.00</b>
City <b>FRANKLIN</b>	State <b>TN</b>	
Zip Code <b>37069</b>		
Purpose of Disbursement <b>FUNDRAISER</b>		
Candidate Name <b>BOB CORKER</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <b>FUNDRAISER</b> <input type="checkbox"/> General	
State: <b>TN</b>	District:	

B. <b>CORNYN, JOHN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 24 / 2008</b>
Mailing Address <b>201 MASSACHUSETTS AVE NE, SUITE C3</b>		Amount of Each Disbursement this Period  <b>, 1,000.00</b>
City <b>WASHINGTON</b>	State <b>DC</b>	
Zip Code <b>20002</b>		
Purpose of Disbursement <b>FUNDRAISER</b>		
Candidate Name <b>JOHN CORNYN</b>		Category/ Type
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Other (specify) <b>FUNDRAISER</b> <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: <b>TX</b>	District:	

C. <b>THOMPSON, GLENN</b>		Date of Disbursement M M / D D / Y Y Y Y <b>07 / 24 / 2008</b>
Mailing Address <b>P.O. BOX 1112</b>		Amount of Each Disbursement this Period  <b>, 1,000.00</b>
City <b>STATE COLLEGE</b>	State <b>PA</b>	
Zip Code <b>16804</b>		
Purpose of Disbursement <b>FUNDRAISER</b>		
Candidate Name <b>GLENN THOMPSON</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Other (specify) <b>FUNDRAISER</b> <input type="checkbox"/> Primary <input type="checkbox"/> General	
State: <b>PA</b>	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>, 3,000.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, , .</b>

28039852841

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

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NAME OF COMMITTEE (In Full)  
**ARKEMA POLITICAL ACTION COMMITTEE**

A. Full Name (Last, First, Middle Initial) <b>WHITFIELD, ED</b>		Date of Disbursement M M / D D / Y Y Y Y <b>08 / 25 / 2008</b>
Mailing Address <b>P.O. BOX 391</b>		Amount of Each Disbursement this Period  <b>, 1,000.00</b>
City <b>HOPKINSVILLE</b>	State <b>KY</b>	
Zip Code <b>42241</b>		
Purpose of Disbursement <b>FUNDRAISER</b>		
Candidate Name <b>ED WHITFIELD</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <b>FUNDRAISER</b>	
State: <b>KY</b>	District:	

B. Full Name (Last, First, Middle Initial) <b>GREEN, GENE</b>		Date of Disbursement M M / D D / Y Y Y Y <b>09 / 12 / 2008</b>
Mailing Address <b>P.O. BOX 16128</b>		Amount of Each Disbursement this Period  <b>, 1,000.00</b>
City <b>HOUSTON</b>	State <b>TX</b>	
Zip Code <b>77222</b>		
Purpose of Disbursement <b>FUNDRAISER</b>		
Candidate Name <b>GENE GREEN</b>		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> Other (specify) <b>FUNDRAISER</b>	
State: <b>TX</b>	District:	

C. Full Name (Last, First, Middle Initial)		Date of Disbursement M M / D D / Y Y Y Y
Mailing Address		Amount of Each Disbursement this Period
City	State	
Zip Code		
Purpose of Disbursement		
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional).....▶	<b>, 2,000.00</b>
TOTAL This Period (last page this line number only).....▶	<b>, 5,000.00</b>

28039852842

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
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<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	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

*ED*

10/14/08

PREPARER  
(3/2005)

DATE PREPARED

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