

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 TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

ADDRESS (number and street) 520 E 34TH AVENUE ANCHORAGE AK 99503

2. FEC IDENTIFICATION NUMBER C00039164 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Post -Election Report for the: General, Runoff, Special

5. Covering Period 07 01 2007 through 12 31 2007

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 KRIS LIRA

Signature of Treasurer Electronically Filed by KRIS LIRA Date 01 30 2008

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
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		8645.63
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	4507.12									
(c) Total Receipts (from Line 19)	52442.00	53755.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	56949.12	62400.63								
7. Total Disbursements (from Line 31)	44299.20	49750.71								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	12649.92	12649.92								
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

TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	5024.00	5174.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	45418.00	46581.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	50442.00	51755.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	2000.00	2000.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	52442.00	53755.00
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	52442.00	53755.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	52442.00	53755.00

DETAILED SUMMARY PAGE

of Disbursements

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Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	44299.20	49750.71
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))..	44299.20	49750.71
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44299.20	49750.71

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	52442.00	53755.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	52442.00	53755.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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 / 44
	<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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Scottie Bartee		Date of Receipt
	Mailing Address P. O. Box 231362		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Anchorage	AK	99523
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Municipality of Anchorage		Occupation Bus Driver	Transaction ID: SA11AI.18630
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
			336

B.	Full Name (Last, First, Middle Initial) STACEY BEEK		Date of Receipt
	Mailing Address POB 111714		<input type="text" value="10"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	ANCHORAGE	AK	99511
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer SELF		Occupation OWNER	Transaction ID: SA11AI.18298
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
			266,261,269

C.	Full Name (Last, First, Middle Initial) KIM A BRANDENBURG		Date of Receipt
	Mailing Address 751 OLD RICHARDSON HWY		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	FAIRBANKS	AK	99701
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer TEAMSTERS LOCAL 959		Occupation DISPATCHER	Transaction ID: SA11AI.18925
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="299.00"/>	Amount of Each Receipt this Period <input type="text" value="100.00"/>
			240

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) KIM A BRANDENBURG		Date of Receipt
	Mailing Address 751 OLD RICHARDSON HWY		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	FAIRBANKS	AK	99701
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18928
Name of Employer TEAMSTERS LOCAL 959		Occupation DISPATCHER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 339.00	<input type="text"/> 40.00
			222

B.	Full Name (Last, First, Middle Initial) Ernie Brooks		Date of Receipt
	Mailing Address 11541 Lower Sunny Cir		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Eagle River	AK	99577
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18497
Name of Employer CSX		Occupation Truck Driver	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	<input type="text"/> 200.00
			457 456

C.	Full Name (Last, First, Middle Initial) Frank T Brumann		Date of Receipt
	Mailing Address Box 2868		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y
	City	State	Zip Code
	Valdez	AK	99686
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.18545
Name of Employer Houston/NANA		Occupation Foreman	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	<input type="text"/> 100.00
			444

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 340.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 44

(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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.

Full Name (Last, First, Middle Initial)
Tim Burzinski

Mailing Address 7905 Stanley Dr

City State Zip Code
Anchorage AK 99518

FEC ID number of contributing federal political committee. C

Name of Employer TOTE Occupation Truck Driver

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 28 / 2007

Transaction ID: SA11AI.18242

Amount of Each Receipt this Period 100.00

300

B.

Full Name (Last, First, Middle Initial)
Tim Burzinski

Mailing Address 7905 Stanley Dr

City State Zip Code
Anchorage AK 99518

FEC ID number of contributing federal political committee. C

Name of Employer TOTE Occupation Truck Driver

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 10 / 24 / 2007

Transaction ID: SA11AI.18604

Amount of Each Receipt this Period 100.00

445

C.

Full Name (Last, First, Middle Initial)
Ken Coleman

Mailing Address 36610 Chinulna Dr

City State Zip Code
Kenai AK 99611

FEC ID number of contributing federal political committee. C

Name of Employer Teamsters Local 959 Occupation Business Agent

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 290.00

Date of Receipt 10 / 25 / 2007

Transaction ID: SA11AI.18740

Amount of Each Receipt this Period 100.00

10

SUBTOTAL of Receipts This Page (optional) 300.00

TOTAL This Period (last page this line number only)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 44

(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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A. Full Name (Last, First, Middle Initial)
JIMMY E CONNOR

Mailing Address **PO BOX 56947**

City **NORTH POLE** State **AK** Zip Code **99705**

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

Name of Employer **HC PRICE** Occupation **DRIVER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **10 / 23 / 2007**

Transaction ID: SA11AI.18550

Amount of Each Receipt this Period **100.00**

307

B. Full Name (Last, First, Middle Initial)
Evelyn Dickens

Mailing Address **8431 12th Ct**

City **Anchorage** State **AK** Zip Code **99504**

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

Name of Employer Occupation **Retired**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt **10 / 24 / 2007**

Transaction ID: SA11AI.18614

Amount of Each Receipt this Period **100.00**

391

C. Full Name (Last, First, Middle Initial)
ROBERT A EVANS

Mailing Address **PO BOX 100384**

City **ANCHORAGE** State **AK** Zip Code **99510**

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

Name of Employer **SELF** Occupation **LOBBYIST**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt **09 / 28 / 2007**

Transaction ID: SA11AI.18221

Amount of Each Receipt this Period **500.00**

487 479 128 74 55

SUBTOTAL of Receipts This Page (optional) ► **700.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Barbara Huff-Tuckness	Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address 1912 Parkview Circle	Transaction ID: SA11AI.18754
	City Anchorage State AK Zip Code 99501	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	143
	Name of Employer Teamsters Local 959 Occupation Business Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 236.00	

B.	Full Name (Last, First, Middle Initial) Barbara Huff-Tuckness	Date of Receipt MM / DD / YYYY 10 / 29 / 2007
	Mailing Address 1912 Parkview Circle	Transaction ID: SA11AI.18875
	City Anchorage State AK Zip Code 99501	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	donation of her raffle winnings
	Name of Employer Teamsters Local 959 Occupation Business Agent Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 486.00	

C.	Full Name (Last, First, Middle Initial) A. MARLENE MCCARTY	Date of Receipt MM / DD / YYYY 10 / 11 / 2007
	Mailing Address 1115 W 20TH AVE #5	Transaction ID: SA11AI.18300
	City ANCHORAGE State AK Zip Code 99503	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	323,326,325
	Name of Employer RETIRED Occupation RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) Aggregate Year-to-Date 400.00	

SUBTOTAL of Receipts This Page (optional)	650.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Dale Miller		Date of Receipt
	Mailing Address PO Box 110717		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 16 / 2007
	City	State	Zip Code
	Anchorage	AK	99509
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Anchorage School District		Occupation Maintenance	Transaction ID: SA11AI.18136
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 50.00
		<input type="text"/> 400.00	PAYROLL DED

B.	Full Name (Last, First, Middle Initial) Dale Miller		Date of Receipt
	Mailing Address PO Box 110717		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 08 / 30 / 2007
	City	State	Zip Code
	Anchorage	AK	99509
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Anchorage School District		Occupation Maintenance	Transaction ID: SA11AI.18165
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 50.00
		<input type="text"/> 450.00	PAYROLL DED

C.	Full Name (Last, First, Middle Initial) Dale Miller		Date of Receipt
	Mailing Address PO Box 110717		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 27 / 2007
	City	State	Zip Code
	Anchorage	AK	99509
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Anchorage School District		Occupation Maintenance	Transaction ID: SA11AI.18195
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period <input type="text"/> 50.00
		<input type="text"/> 500.00	PAYROLL DED

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 150.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Dale Miller		Date of Receipt
	Mailing Address PO Box 110717		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Anchorage	AK	99509
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Anchorage School District		Occupation Maintenance	Transaction ID: SA11AI.18394
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 550.00	<input type="text"/> 50.00
			PAYROLL DED

B.	Full Name (Last, First, Middle Initial) Derek Musto		Date of Receipt
	Mailing Address PO Box 243676		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Anchorage	AK	99524
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer Lynden		Occupation Truck Driver	Transaction ID: SA11AI.18709
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 299.00	<input type="text"/> 100.00
			401

C.	Full Name (Last, First, Middle Initial) Tyrone Neel		Date of Receipt
	Mailing Address 10946 Iditarod Circle		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Eagle River	AK	99577
	FEC ID number of contributing federal political committee.		<input type="text"/> C <input type="text"/>
Name of Employer CSX		Occupation Truck Driver	Transaction ID: SA11AI.18578
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text"/> 300.00	<input type="text"/> 100.00
			293

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 250.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 44
	<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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Gerald Neeser		Date of Receipt
	Mailing Address 2501 Blueberry Rd		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 09 / 28 / 2007
	City	State	Zip Code
	Anchorage	AK	99503
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.18222
Name of Employer Neeser Construction		Occupation Owner	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 500.00
			127 148 339 476 500

B.	Full Name (Last, First, Middle Initial) Sally Nordstrom		Date of Receipt
	Mailing Address PO Box 100562		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 11 / 2007
	City	State	Zip Code
	Anchorage	AK	99510
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.18269
Name of Employer self		Occupation driver	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 250.00
			37

C.	Full Name (Last, First, Middle Initial) MICHAEL L PETROVICH		Date of Receipt
	Mailing Address 520 E 34TH AVE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 10 / 23 / 2007
	City	State	Zip Code
	ANCHORAGE	AK	99503
	FEC ID number of contributing federal political committee.		Transaction ID: SA11AI.18401
Name of Employer LOCAL 959		Occupation BA	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 399.00
			75 73 72

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)	PAGE 14 / 44
<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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) MICHAEL L PETROVICH		Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address 520 E 34TH AVE		Transaction ID: SA11AI.18631
	City ANCHORAGE	State AK	Zip Code 99503
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer LOCAL 959	Occupation BA	66
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 499.00	

B.	Full Name (Last, First, Middle Initial) Bill Pierce		Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address PO Box 243401		Transaction ID: SA11AI.18708
	City Anchorage	State AK	Zip Code 99524
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 200.00
	Name of Employer Teamsters Local 959	Occupation Business Agent	290 289
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 290.00	

C.	Full Name (Last, First, Middle Initial) Robby Robinson		Date of Receipt MM / DD / YYYY 10 / 25 / 2007
	Mailing Address 3141 Dounington		Transaction ID: SA11AI.18715
	City Anchorage	State AK	Zip Code 99503
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 100.00
	Name of Employer retired	Occupation	356
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	400.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 44
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Donald Roderick		Date of Receipt
	Mailing Address 412 E. 13th Ave Sp#2		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Anchorage	AK	99501
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Carrs/Safeway		Occupation Warehouseman	Transaction ID: SA11AI.18739
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="300.00"/>	<input type="text" value="300.00"/>
			423 415 140

B.	Full Name (Last, First, Middle Initial) Nancy Shaw		Date of Receipt
	Mailing Address 520 E. 34th Ave.		<input type="text" value="10"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Anchorage	AK	99503
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer Teamsters Local 959		Occupation Attorney	Transaction ID: SA11AI.18756
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="299.00"/>	<input type="text" value="100.00"/>
			44

C.	Full Name (Last, First, Middle Initial) LISA SMULICK		Date of Receipt
	Mailing Address 9410 APHRODITE DR		<input type="text" value="10"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	ANCHORAGE	AK	99515
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer HORIZON		Occupation CLERK	Transaction ID: SA11AI.18337
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="225.00"/>	<input type="text" value="75.00"/>
			491

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="475.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 16 / 44
(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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.

Full Name (Last, First, Middle Initial)
LISA SMULICK

Mailing Address 9410 APHRODITE DR

City ANCHORAGE State AK Zip Code 99515

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

Name of Employer HORIZON Occupation CLERK

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 275.00

Date of Receipt: 10 / 23 / 2007
Transaction ID: SA11AI.18577
 Amount of Each Receipt this Period: 50.00

410

B.

Full Name (Last, First, Middle Initial)
Bob Thorne

Mailing Address 4801 Catkin Circle

City Anchorage State AK Zip Code 99502

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

Name of Employer Purcell/NANA Slope Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 09 / 28 / 2007
Transaction ID: SA11AI.18220
 Amount of Each Receipt this Period: 100.00

467

C.

Full Name (Last, First, Middle Initial)
MARK WISTHOFF

Mailing Address 520 E 34TH AVE #102

City ANCHORAGE State AK Zip Code 99503

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

Name of Employer TEAMSTERS Occupation BA

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt: 10 / 12 / 2007
Transaction ID: SA11AI.18301
 Amount of Each Receipt this Period: 100.00

35

SUBTOTAL of Receipts This Page (optional) ► 250.00

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 17 / 44
	(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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) MARK WISTHOFF		Date of Receipt
	Mailing Address 520 E 34TH AVE #102		<input type="text" value="10"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	ANCHORAGE	AK	99503
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11AI.18366
Name of Employer TEAMSTERS	Occupation BA	Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="100.00"/>	
	<input type="text" value="340.00"/>	22	

B.	Full Name (Last, First, Middle Initial) MARK WISTHOFF		Date of Receipt
	Mailing Address 520 E 34TH AVE #102		<input type="text" value="10"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	ANCHORAGE	AK	99503
	FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID: SA11AI.18393
Name of Employer TEAMSTERS	Occupation BA	Amount of Each Receipt this Period	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="9.00"/>	
	<input type="text" value="349.00"/>	PAYROLL DED	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="109.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="5024.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 18 / 44
	(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)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) LOCAL 302		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7
	Mailing Address 900 W NORTHERN LIGHTS BLVD		Transaction ID: SA11C.18200
	City ANCHORAGE	State AK	Zip Code 99503
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	CONTRIBUTION

B.	Full Name (Last, First, Middle Initial) LOCAL 341		Date of Receipt M M / D D / Y Y Y Y Y 0 9 / 2 8 / 2 0 0 7
	Mailing Address 2501 COMMERCIAL DR		Transaction ID: SA11C.18202
	City ANCHORAGE	State AK	Zip Code 99501
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1000.00
	Name of Employer		Occupation
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1000.00	CONTRIBUTION

SUBTOTAL of Receipts This Page (optional)	▶	2000.00
TOTAL This Period (last page this line number only)	▶	2000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 19 / 44

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Alaska Laser Printing	Transaction ID: SB29.18789 Date of Disbursement
	Mailing Address 165 E. 56th Ave.	<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99518	Amount of Each Disbursement this Period
	Purpose of Disbursement mailing costs re Proposition 1 flyer Candidate Name	<input type="text" value="875.04"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/ Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) RICK BALDWIN	Transaction ID: SB29.18813 Date of Disbursement
	Mailing Address 125 N WILLOW ST	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City KENAI State AK Zip Code 99611	Amount of Each Disbursement this Period
	Purpose of Disbursement raffle winnings Candidate Name	<input type="text" value="250.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Marshall 'Buddy' Bise	Transaction ID: SB29.18857 Date of Disbursement
	Mailing Address 52 Briar Ct	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City Conroe State TX Zip Code 77304	Amount of Each Disbursement this Period
	Purpose of Disbursement seller of third most tickets Candidate Name	<input type="text" value="100.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1225.04"/>
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) KELLY L BROWN	Transaction ID: SB29.18784 Date of Disbursement 09 / 20 / 2007
	Mailing Address POB 1907	
	City VALDEZ State AK Zip Code 99686	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement campaign contribution Candidate Name Kelly Brown Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

B.	Full Name (Last, First, Middle Initial) Bob Buch	Transaction ID: SB29.18861 Date of Disbursement 12 / 21 / 2007
	Mailing Address 3160 W 71st	
	City Anchorage State AK Zip Code 99502	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement campaign contribution Candidate Name Bob Buch Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type

C.	Full Name (Last, First, Middle Initial) Scotty Carlisle	Transaction ID: SB29.18821 Date of Disbursement 10 / 29 / 2007
	Mailing Address 4651 Gambell	
	City Anchorage State AK Zip Code 99503	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type

SUBTOTAL of Disbursements This Page (optional)	1750.00
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 21 / 44

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Leo Cerny Mailing Address 6309 High Place City Anchorage State AK Zip Code 99510 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18827 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) Color Art Printing Co, Inc Mailing Address 430 W Seventh Avenue City Anchorage State AK Zip Code 99501 Purpose of Disbursement printing raffle tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18770 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 2 6 / 2 0 0 7	Amount of Each Disbursement this Period 285.00
C.	Full Name (Last, First, Middle Initial) JIMMY E CONNOR Mailing Address PO BOX 56947 City NORTH POLE State AK Zip Code 99705 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18815 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 0 7	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional)	785.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

<p>A. Full Name (Last, First, Middle Initial) JIMMY E CONNOR</p> <p>Mailing Address PO BOX 56947</p> <p>City NORTH POLE State AK Zip Code 99705</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18847</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="9028.00"/></p> <p><input type="text" value="001"/> Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) Harry Crawford</p> <p>Mailing Address 716 W 4th Avenue</p> <p>City Anchorage State AK Zip Code 99501</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Harry Crawford</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AK District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18862</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Nancy A Dahlstrom</p> <p>Mailing Address PO Box 771094</p> <p>City Eagle River State AK Zip Code 99577</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Nancy Dahlstrom</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AK District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18871</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="text" value="011"/> Category/Type</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p><input type="text" value="11028.00"/></p>
<p>TOTAL This Period (last page this line number only)</p>	<p><input type="text" value=""/></p>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

<p>A. Full Name (Last, First, Middle Initial) Bettye Davis</p> <p>Mailing Address 2240 Foxhall Drive</p> <p>City Anchorage State AK Zip Code 99504</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Bettye Davis</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: AK District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18859</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p>
<p>B. Full Name (Last, First, Middle Initial) ROBERT A EVANS</p> <p>Mailing Address PO BOX 100384</p> <p>City ANCHORAGE State AK Zip Code 99510</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18845</p> <p>Date of Disbursement 10 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>001 Category/Type</p>
<p>C. Full Name (Last, First, Middle Initial) Mr. Mark A. Ewing</p> <p>Mailing Address 290 Herning Avenue</p> <p>City Wasilla State AK Zip Code 99654</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Mr. Mark A. Ewing</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18774</p> <p>Date of Disbursement 08 / 16 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

<p>A. Full Name (Last, First, Middle Initial) Hollis French</p> <p>Mailing Address 2640 TELEQUANA DR</p> <p>City Anchorage State AK Zip Code 99517</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Hollis French</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.18860</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) Lori A. Galloway</p> <p>Mailing Address P. O. Box 111393</p> <p>City Anchorage State AK Zip Code 99511</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.18797</p> <p>Date of Disbursement 10 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>001 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) Sandra Gardeline</p> <p>Mailing Address 4315 Beechcraft</p> <p>City Anchorage State AK Zip Code 99517</p> <p>Purpose of Disbursement seller of second most tickets sold</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.18855</p> <p>Date of Disbursement 10 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 150.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1650.00

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) John Harris	Transaction ID: SB29.18776 Date of Disbursement 08 / 29 / 2007
	Mailing Address P.O. Box 305	Amount of Each Disbursement this Period 1000.00
	City Valdez State AK Zip Code 99686	
	Purpose of Disbursement campaign contribution Candidate Name John Harris	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) MICHAEL C HAWKER	Transaction ID: SB29.18864 Date of Disbursement 12 / 21 / 2007
	Mailing Address BOX 111329	Amount of Each Disbursement this Period 1000.00
	City ANCHORAGE State AK Zip Code 99511	
	Purpose of Disbursement campaign contribution Candidate Name Michael Hawker	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Brent Heisler	Transaction ID: SB29.18839 Date of Disbursement 10 / 29 / 2007
	Mailing Address 5750 Glenn Hwy., Sp. 40	Amount of Each Disbursement this Period 125.00
	City Anchorage State AK Zip Code 99504	
	Purpose of Disbursement raffle winnings Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2125.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) ROBERT HOXIE	Transaction ID: SB29.18851 Date of Disbursement 10 / 29 / 2007	
	Mailing Address POB 57028		
	City NORTH POLE State AK Zip Code 99705	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement seller of winning ticket Candidate Name	001	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) Barbara Huff-Tuckness	Transaction ID: SB29.18853 Date of Disbursement 10 / 29 / 2007	
	Mailing Address 1912 Parkview Circle		
	City Anchorage State AK Zip Code 99501	Amount of Each Disbursement this Period	250.00
	Purpose of Disbursement seller of most tickets Candidate Name	001	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) JILLANNE M INGLIS	Transaction ID: SB29.18831 Date of Disbursement 10 / 29 / 2007	
	Mailing Address 7041 MIRANDA DR		
	City ANCHORAGE State AK Zip Code 99507	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement raffle winnings Candidate Name	001	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	1250.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Inkspot Printing	Transaction ID: SB29.18786 Date of Disbursement
	Mailing Address 189 E. Nelson	<input type="text" value="09"/> / <input type="text" value="25"/> / <input type="text" value="2007"/>
	City Wasilla State AK Zip Code 99654	Amount of Each Disbursement this Period
	Purpose of Disbursement door hangers to support Proposition 1	<input type="text" value="256.25"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) Internal Revenue Service	Transaction ID: SB29.18849 Date of Disbursement
	Mailing Address Internal Revenue Service Center	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City Ogden State UT Zip Code 84201	Amount of Each Disbursement this Period
	Purpose of Disbursement withholding on raffle winnings	<input type="text" value="3472.00"/>
	Candidate Name	<input type="text" value="001"/> 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"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) RAY JARAMILLO	Transaction ID: SB29.18837 Date of Disbursement
	Mailing Address 1520 BEAVER PL	<input type="text" value="10"/> / <input type="text" value="29"/> / <input type="text" value="2007"/>
	City ANCHORAGE State AK Zip Code 99504	Amount of Each Disbursement this Period
	Purpose of Disbursement raffle winnings	<input type="text" value="250.00"/>
	Candidate Name	<input type="text" value="001"/> 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"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3978.25"/>
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

<p>A. Full Name (Last, First, Middle Initial) Reggie Joule</p> <p>Mailing Address PO Box 1269</p> <p>City Kotzebue State AK Zip Code 99752</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Reggie Joule</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18865</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) SCOTT KAWASAKI</p> <p>Mailing Address 2008 CARR AVE</p> <p>City FAIRBANKS State AK Zip Code 99709</p> <p>Purpose of Disbursement campaign contribution</p> <p>Candidate Name Scott Kawaski</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18866</p> <p>Date of Disbursement 12 / 21 / 2007</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) MICHAEL LEATHERMAN</p> <p>Mailing Address 4111 E 20 #11</p> <p>City ANCHORAGE State AK Zip Code 99508</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18819</p> <p>Date of Disbursement 10 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 1250.00</p> <p>001 Category/ Type</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2250.00

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) KEVIN MEYER	Transaction ID: SB29.18867 Date of Disbursement 12 / 21 / 2007
	Mailing Address 4020 WINCHESTER LOOP	Amount of Each Disbursement this Period 1000.00
	City ANCHORAGE State AK Zip Code 99507	
	Purpose of Disbursement campaign contribution Candidate Name Kevin Meyer	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) SYLVIA V MILLER	Transaction ID: SB29.18811 Date of Disbursement 10 / 29 / 2007
	Mailing Address 1501 BARBARA DR	Amount of Each Disbursement this Period 250.00
	City KENAI State AK Zip Code 99611	
	Purpose of Disbursement raffle winnings Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) BRADLEY D OWENS	Transaction ID: SB29.18809 Date of Disbursement 10 / 29 / 2007
	Mailing Address 2207 BELAIR DR	Amount of Each Disbursement this Period 1000.00
	City ANCHORAGE State AK Zip Code 99517	
	Purpose of Disbursement raffle winnings Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	2250.00
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) KATHERINE PHILLIPS	Transaction ID: SB29.18801 Date of Disbursement																			
	Mailing Address 1717 TIDEWATER RD	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	7												
	City ANCHORAGE State AK Zip Code 99507	Amount of Each Disbursement this Period																			
	Purpose of Disbursement raffle winnings Candidate Name	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/ Type																			

B.	Full Name (Last, First, Middle Initial) John Pike	Transaction ID: SB29.18803 Date of Disbursement																			
	Mailing Address PO Box 111523	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	7												
	City Anchorage State AK Zip Code 99511	Amount of Each Disbursement this Period																			
	Purpose of Disbursement raffle winnings Candidate Name	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/ Type																			

C.	Full Name (Last, First, Middle Initial) Charles Pratt	Transaction ID: SB29.18843 Date of Disbursement																			
	Mailing Address 733 W 4th #674	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0		2	9		2	0	0	7												
	City Anchorage State AK Zip Code 99501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement raffle winnings Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/ Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1500.00</td></tr></table>	1500.00
1500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) JUANITA PURRY	Transaction ID: SB29.18835
	Mailing Address PO BOX 140734	Date of Disbursement 10 / 29 / 2007
	City ANCHORAGE State AK Zip Code 99501	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement raffle winnings	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Donald Roderick	Transaction ID: SB29.18833
	Mailing Address 412 E. 13th Ave Sp#2	Date of Disbursement 10 / 29 / 2007
	City Anchorage State AK Zip Code 99501	Amount of Each Disbursement this Period 250.00
	Purpose of Disbursement raffle winnings	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Bob Roses	Transaction ID: SB29.18868
	Mailing Address 8200 E. 2nd Avenue	Date of Disbursement 12 / 21 / 2007
	City Anchorage State AK Zip Code 99504	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement campaign contribution	011 Category/ Type
	Candidate Name Bob Roses	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Ralph Samuels Mailing Address 8220 Frank St City Anchorage State AK Zip Code 99518 Purpose of Disbursement campaign contribution Candidate Name Ralph Samuels Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18870 Date of Disbursement 12 / 21 / 2007	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Senate Democratic Committee Mailing Address PO box 104199 City Anchorage State AK Zip Code 99510 Purpose of Disbursement contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18872 Date of Disbursement 12 / 21 / 2007	Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) ARSHELLA SMITH Mailing Address 10219 CHAIN OF ROCK City EAGLE RIVER State AK Zip Code 99577 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18829 Date of Disbursement 10 / 29 / 2007	Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

<p>A. Full Name (Last, First, Middle Initial) Jerry T. Smith</p> <p>Mailing Address 2440 E Tudor #1021</p> <p>City Anchorage State AK Zip Code 99507-1185</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18807</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>B. Full Name (Last, First, Middle Initial) THOMAS SMITH</p> <p>Mailing Address 6410 C ST</p> <p>City ANCHORAGE State AL Zip Code 99516</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18841</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="125.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>
<p>C. Full Name (Last, First, Middle Initial) DAVID ST. LAURENT</p> <p>Mailing Address 585 KEELING</p> <p>City NORTH POLE State AK Zip Code 99705</p> <p>Purpose of Disbursement raffle winnings</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.18825</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="9"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p> <p>Category/Type: <input type="text" value="001"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="625.00"/>
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Dept. of Revenue State of Alaska	Transaction ID: SB29.18879 Date of Disbursement																			
	Mailing Address P.O. Box 110440	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>2</td><td>/</td><td>3</td><td>1</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	3	1	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	2	/	3	1	/	2	0	0	7												
	City Juneau State AK Zip Code 99811-0440	Amount of Each Disbursement this Period																			
	Purpose of Disbursement gaming fee Candidate Name	<table border="1"><tr><td>50.00</td></tr></table>	50.00																		
50.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/Type																			

B.	Full Name (Last, First, Middle Initial) WAYNE A STEVENS	Transaction ID: SB29.18799 Date of Disbursement																			
	Mailing Address 1402 SIDE CT	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>1</td><td>0</td><td>/</td><td>2</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	2	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
1	0	/	2	9	/	2	0	0	7												
	City JUNEAU State AK Zip Code 99801	Amount of Each Disbursement this Period																			
	Purpose of Disbursement raffle winnings Candidate Name	<table border="1"><tr><td>750.00</td></tr></table>	750.00																		
750.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		001 Category/Type																			

C.	Full Name (Last, First, Middle Initial) Terry Strle	Transaction ID: SB29.18777 Date of Disbursement																			
	Mailing Address Slater Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>9</td><td>/</td><td>2</td><td>4</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	2	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	9	/	2	4	/	2	0	0	7												
	City Fairbanks State AK Zip Code 99701	Amount of Each Disbursement this Period																			
	Purpose of Disbursement campaign contribution Candidate Name Terry Strle	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		011 Category/Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1300.00</td></tr></table>	1300.00
1300.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td></tr></table>	

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Valerie Therrien Mailing Address 779 8th Avenue City Fairbanks State AK Zip Code 99701 Purpose of Disbursement campaign contribution Candidate Name Valerie Therrien Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18779 Date of Disbursement 09 / 24 / 2007	Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) ANDREW TRONRUD Mailing Address POB 523 City SKAGWAY State AK Zip Code 99840 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18817 Date of Disbursement 10 / 29 / 2007	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) KEVIN L TWING Mailing Address 235 W 11TH City ANCHORAGE State AL Zip Code 99501 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18823 Date of Disbursement 10 / 29 / 2007	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 36 / 44

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement bankcard fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18881 Date of Disbursement 07 / 31 / 2007	Amount of Each Disbursement this Period 30.00
B.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement service charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18910 Date of Disbursement 07 / 31 / 2007	Amount of Each Disbursement this Period 5.68
C.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement bankcard fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18883 Date of Disbursement 08 / 31 / 2007	Amount of Each Disbursement this Period 26.21

SUBTOTAL of Disbursements This Page (optional) ▶

61.89

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18885 Date of Disbursement
	Mailing Address PO Box 196127	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period
	Purpose of Disbursement bankcard discount fee Candidate Name	<input type="text" value="3.99"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

B.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18912 Date of Disbursement
	Mailing Address PO Box 196127	<input type="text" value="08"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period
	Purpose of Disbursement service charges Candidate Name	<input type="text" value="5.50"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

C.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18887 Date of Disbursement
	Mailing Address PO Box 196127	<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period
	Purpose of Disbursement bankcard discount fee Candidate Name	<input type="text" value="1.44"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		<input type="text" value="001"/> Category/Type

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement bankcard discount fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18889 Date of Disbursement 09 / 30 / 2007 Amount of Each Disbursement this Period 15.96 001 Category/ Type
B.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement bankcard fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18891 Date of Disbursement 09 / 30 / 2007 Amount of Each Disbursement this Period 0.80 001 Category/ Type
C.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement service charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18914 Date of Disbursement 09 / 30 / 2007 Amount of Each Disbursement this Period 5.23 001 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

21.99

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18893
	Mailing Address PO Box 196127	Date of Disbursement 10 / 31 / 2007
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period 2.26
	Purpose of Disbursement Service charge Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18895
	Mailing Address PO Box 196127	Date of Disbursement 10 / 31 / 2007
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period 15.96
	Purpose of Disbursement bankcard discount fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Wells Fargo	Transaction ID: SB29.18897
	Mailing Address PO Box 196127	Date of Disbursement 10 / 31 / 2007
	City Anchorage State AK Zip Code 99519	Amount of Each Disbursement this Period 0.40
	Purpose of Disbursement bankcard fee Candidate Name	001 Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	18.62
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement service charge Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18899 Date of Disbursement 10 / 31 / 2007
	Amount of Each Disbursement this Period 13.50
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement bankcard fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18903 Date of Disbursement 10 / 31 / 2007
	Amount of Each Disbursement this Period 6.60
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement service charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18916 Date of Disbursement 10 / 31 / 2007
	Amount of Each Disbursement this Period 5.69
	001 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ► 25.79

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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement bankcard discount fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18901 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 205.60
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement service charges Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18918 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 3 0 / 2 0 0 7
	Amount of Each Disbursement this Period 5.29
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) Wells Fargo <hr/> Mailing Address PO Box 196127 <hr/> City Anchorage State AK Zip Code 99519 <hr/> Purpose of Disbursement bankcard fee Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18905 Date of Disbursement M M / D D / Y Y Y Y 1 2 / 3 1 / 2 0 0 7
	Amount of Each Disbursement this Period 115.00
	Category/ Type 001
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	325.89
TOTAL This Period (last page this line number only) ▶	(Empty box)

**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

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement bankcard interchange fee Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18907 Date of Disbursement 12 / 31 / 2007	Amount of Each Disbursement this Period 12.61
B.	Full Name (Last, First, Middle Initial) Wells Fargo Mailing Address PO Box 196127 City Anchorage State AK Zip Code 99519 Purpose of Disbursement service charges Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18920 Date of Disbursement 12 / 31 / 2007	Amount of Each Disbursement this Period 5.19
C.	Full Name (Last, First, Middle Initial) Dan Williams Mailing Address POB 1033 City Kenai State AK Zip Code 99611 Purpose of Disbursement raffle winnings Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.18805 Date of Disbursement 10 / 29 / 2007	Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	267.80
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.	Full Name (Last, First, Middle Initial) Wize Guy Wear	Transaction ID: SB29.18781 Date of Disbursement
	Mailing Address 800 E. Dimond Blvd, Suite 152	<input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99515	Amount of Each Disbursement this Period
	Purpose of Disbursement signs to promote Proposition 1 Candidate Name	<input type="text" value="600.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="001"/> Category/Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Wize Guy Wear	Transaction ID: SB29.18792 Date of Disbursement
	Mailing Address 800 E. Dimond Blvd, Suite 152	<input type="text" value="09"/> / <input type="text" value="28"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99515	Amount of Each Disbursement this Period
	Purpose of Disbursement lawn signs for Proposition 1 Candidate Name	<input type="text" value="1200.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Wize Guy Wear	Transaction ID: SB29.18795 Date of Disbursement
	Mailing Address 800 E. Dimond Blvd, Suite 152	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2007"/>
	City Anchorage State AK Zip Code 99515	Amount of Each Disbursement this Period
	Purpose of Disbursement banners supporting Proposition 1 Candidate Name	<input type="text" value="1800.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	<input type="text" value="011"/> Category/Type
	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3600.00"/>
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 type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

TEAMSTERS LOCAL 959 ALASKA LABOR INDEPENDENT VOTER EDUCATION

A.

Full Name (Last, First, Middle Initial)

DON YOUNG

Transaction ID: SB29.18772

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	8		2	0	0	7

Mailing Address BOX 125

City FT. YUKON State AK Zip Code 99501

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
campaign contribution

011
Category/ Type

Candidate Name
DONALD E YOUNG

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: AK District: 00

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

44299.20
