

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5  
International Longshore and Warehouse Union -- Political Action Fund

ADDRESS (number and street) 1188 Franklin Street  
Check if different than previously reported. (ACC) San Francisco CA 94109

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
C C00176214 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End Report (YE)  
 July 31 Mid-Year Report (Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day PRE-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12S)  
Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of    
(d) 30-Day POST-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on M M M / D D D / Y Y Y Y Y Y Y Y in the State of  

5. Covering Period M M M / D D D / Y Y Y Y Y Y Y Y through M M M / D D D / Y Y Y Y Y Y Y Y  
11 / 01 / 2015 through 11 / 30 / 2015

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 William E. Adams

Signature of Treasurer William E. Adams [Electronically Filed] Date M M M / D D D / Y Y Y Y Y Y Y Y  
12 / 16 / 2015

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

**International Longshore and Warehouse Union -- Political Action Fund**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		332214.89
(b) Cash on Hand at Beginning of Reporting Period.....	330993.23	
(c) Total Receipts (from Line 19) .....	6408.00	80610.34
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	337401.23	412825.23
7. Total Disbursements (from Line 31).....	8000.00	83424.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	329401.23	329401.23
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE**  
of Receipts

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

**International Longshore and Warehouse Union -- Political Action Fund**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	5547.50	46898.61
(ii) Unitemized .....	860.50	33711.73
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	6408.00	80610.34
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) .....	6408.00	80610.34
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 Transfers (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))..... ▶	6408.00	80610.34
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	6408.00	80610.34

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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.....	8000.00	82950.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	0.00	474.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	8000.00	83424.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8000.00	83424.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	6408.00	80610.34
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	6408.00	80610.34
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 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. KANE K AHUNA</b>		Date of Receipt
Mailing Address 5903 NE 23RD AVE		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98041</b>
Name of Employer PMA		Amount of Each Receipt this Period
Occupation Longshore worker		<input type="text" value="5.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="220.00"/>		

Full Name (Last, First, Middle Initial) <b>B. KANE K AHUNA</b>		Date of Receipt
Mailing Address 5903 NE 23RD AVE		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98047</b>
Name of Employer PMA		Amount of Each Receipt this Period
Occupation Longshore worker		<input type="text" value="5.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="225.00"/>		

Full Name (Last, First, Middle Initial) <b>C. KANE K AHUNA</b>		Date of Receipt
Mailing Address 5903 NE 23RD AVE		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City PORTLAND	State OR	Zip Code 97211
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98054</b>
Name of Employer PMA		Amount of Each Receipt this Period
Occupation Longshore worker		<input type="text" value="5.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="230.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15.00"/>
<b>TOTAL</b> 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 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. KANE K AHUNA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5903 NE 23RD AVE  
 City PORTLAND State OR Zip Code 97211  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2015  
**Transaction ID : SA11AI.98061**  
 Amount of Each Receipt this Period  
 5.00

**B. RUDY ALBA Sr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 S TROTWOOD Ave  
 City SAN PEDRO State CA Zip Code 90732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Lpngshoreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 800.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98113**  
 Amount of Each Receipt this Period  
 25.00

**C. RUDY ALBA Sr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1400 S TROTWOOD Ave  
 City SAN PEDRO State CA Zip Code 90732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Lpngshoreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 825.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98122**  
 Amount of Each Receipt this Period  
 25.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 8 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. RUDY ALBA Sr**  
 Mailing Address 1400 S TROTWOOD Ave  
 City SAN PEDRO State CA Zip Code 90732  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Lpngshoreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **850.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 25 / 2015**  
**Transaction ID : SA11AI.98132**  
 Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**B. 1 Matthew J Arakawa**  
 Mailing Address 451 Atkinson Dr  
 City HONOLULU State HI Zip Code 96814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU Local 142 Occupation Union Official  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **525.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 17 / 2015**  
**Transaction ID : SA11AI.97918**  
 Amount of Each Receipt this Period  
**25.00**

Full Name (Last, First, Middle Initial)  
**C. 1 Matthew J Arakawa**  
 Mailing Address 451 Atkinson Dr  
 City HONOLULU State HI Zip Code 96814  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU Local 142 Occupation Union Official  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **550.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 17 / 2015**  
**Transaction ID : SA11AI.97919**  
 Amount of Each Receipt this Period  
**25.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **75.00**  
**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 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARIO ARTEAGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2549 EAST 220TH ST  
 City LONG BEACH State CA Zip Code 90810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.97980**  
 Amount of Each Receipt this Period  
 10.00

**B. MARIO ARTEAGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2549 EAST 220TH ST  
 City LONG BEACH State CA Zip Code 90810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.97986**  
 Amount of Each Receipt this Period  
 10.00

**C. MARIO ARTEAGA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2549 EAST 220TH ST  
 City LONG BEACH State CA Zip Code 90810  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.97992**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 2549 EAST 220TH ST

City LONG BEACH State CA Zip Code 90810

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt **11 / 25 / 2015**

**Transaction ID : SA11AI.97998**

Amount of Each Receipt this Period **10.00**

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

Mailing Address 8045 MONACO # 62

City STANTON State CA Zip Code 90680

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1060.00**

Date of Receipt **11 / 05 / 2015**

**Transaction ID : SA11AI.98160**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 8045 MONACO # 62

City STANTON State CA Zip Code 90680

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **1080.00**

Date of Receipt **11 / 05 / 2015**

**Transaction ID : SA11AI.98161**

Amount of Each Receipt this Period **20.00**

**SUBTOTAL** of Receipts This Page (optional)..... **35.00**

**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 OF 102
<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98162</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1085.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98163</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1105.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>			Date of Receipt
Mailing Address 8045 MONACO # 62			<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98164</b>
STANTON	CA	90680	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="5.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1110.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="30.00"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value=""/>

**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 OF 102
<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM B BALDWIN</b>		Date of Receipt
Mailing Address 8045 MONACO # 62		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98165</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1130.00"/>		

Full Name (Last, First, Middle Initial) <b>B. WILLIAM B BALDWIN</b>		Date of Receipt
Mailing Address 8045 MONACO # 62		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98166</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="5.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1135.00"/>		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM B BALDWIN</b>		Date of Receipt
Mailing Address 8045 MONACO # 62		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
City STANTON	State CA	Zip Code 90680
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98167</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="20.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="1155.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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 OF 102
	<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	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1025.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98155**  
 Amount of Each Receipt this Period  
 25.00

**B. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1050.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98156**  
 Amount of Each Receipt this Period  
 25.00

**C. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1075.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98157**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 75.00  
**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 14 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1100.00

Date of Receipt 11 / 23 / 2015  
**Transaction ID : SA11AI.98158**  
 Amount of Each Receipt this Period 25.00

**B. SUSAN SPANTON BARKER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 21804 MOUNTAIN HWY E  
 PMB 98  
 City SPANAWAY State WA Zip Code 98387  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1125.00

Date of Receipt 11 / 23 / 2015  
**Transaction ID : SA11AI.98159**  
 Amount of Each Receipt this Period 25.00

**C. BOYCE E CARDELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4820 WEST VIEW DRIVE  
 City EVERETT State WA Zip Code 98203  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 1000.00

Date of Receipt 11 / 17 / 2015  
**Transaction ID : SA11AI.97881**  
 Amount of Each Receipt this Period 1000.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 1050.00  
**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 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DOUGLAS R. CAREY</b>		Date of Receipt
Mailing Address 13526 SE Sherman		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City	State	Zip Code
PORTLAND	OR	97233
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.98040</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Maritime Association	Longshore Worker	<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="220.00"/>	

Full Name (Last, First, Middle Initial) <b>B. DOUGLAS R. CAREY</b>		Date of Receipt
Mailing Address 13526 SE Sherman		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
PORTLAND	OR	97233
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.98046</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Maritime Association	Longshore Worker	<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="225.00"/>	

Full Name (Last, First, Middle Initial) <b>C. DOUGLAS R. CAREY</b>		Date of Receipt
Mailing Address 13526 SE Sherman		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code
PORTLAND	OR	97233
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	<b>Transaction ID : SA11AI.98053</b>
Name of Employer	Occupation	Amount of Each Receipt this Period
Pacific Maritime Association	Longshore Worker	<input type="text" value="5.00"/>
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<input type="text" value="230.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="15.00"/>
<b>TOTAL</b> 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 16 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. DOUGLAS R. CAREY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 13526 SE Sherman  
 City PORTLAND State OR Zip Code 97233  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 24 / 2015  
**Transaction ID : SA11AI.98060**  
 Amount of Each Receipt this Period  
 5.00

**B. 1 ROBERT CARRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26363 PINES ESTATES DR  
 City HARBOR CITY State CA Zip Code 90710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.97897**  
 Amount of Each Receipt this Period  
 10.50

**C. 1 ROBERT CARRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 26363 PINES ESTATES DR  
 City HARBOR CITY State CA Zip Code 90710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 472.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.97901**  
 Amount of Each Receipt this Period  
 10.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	26.00
<b>TOTAL</b> 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 17 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 1 ROBERT CARRILLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 483.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.97905**

Amount of Each Receipt this Period  
 10.50

**B. 1 ROBERT CARRILLO**  
Full Name (Last, First, Middle Initial)

Mailing Address 26363 PINES ESTATES DR

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 493.50

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.97909**

Amount of Each Receipt this Period  
 10.50

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

Mailing Address 11126 DUNE STREET

City NORWALK State CA Zip Code 90650

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.98021**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 31.00

**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 18 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DESIDERIO c CHAVEZ</b>			Date of Receipt
Mailing Address 11126 DUNE STREET			<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City NORWALK	State CA	Zip Code 90650	<b>Transaction ID : SA11AI.98022</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="440.00"/>		

Full Name (Last, First, Middle Initial) <b>B. DESIDERIO c CHAVEZ</b>			Date of Receipt
Mailing Address 11126 DUNE STREET			<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City NORWALK	State CA	Zip Code 90650	<b>Transaction ID : SA11AI.98023</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="450.00"/>		

Full Name (Last, First, Middle Initial) <b>C. DESIDERIO c CHAVEZ</b>			Date of Receipt
Mailing Address 11126 DUNE STREET			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
City NORWALK	State CA	Zip Code 90650	<b>Transaction ID : SA11AI.98024</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.00"/>
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="460.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 19 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. PAUL CIRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 W. PASEO DEL MAR  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.98107**  
 Amount of Each Receipt this Period  
 10.00

**B. PAUL CIRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 W. PASEO DEL MAR  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98117**  
 Amount of Each Receipt this Period  
 10.00

**C. PAUL CIRILLO**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 932 W. PASEO DEL MAR  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98126**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 20 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 932 W. PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt **11 / 25 / 2015**

**Transaction ID : SA11AI.98136**

Amount of Each Receipt this Period **10.00**

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

Mailing Address 17810 NE - 290th St YACOLT

City BATTLE GROUND State WA Zip Code 98604

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 10 / 2015**

**Transaction ID : SA11AI.97854**

Amount of Each Receipt this Period **20.00**

**C. Arthur A Clark Jr**  
Full Name (Last, First, Middle Initial)

Mailing Address 412 N 4th St

City TACOMA State WA Zip Code 98403

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **215.00**

Date of Receipt **11 / 17 / 2015**

**Transaction ID : SA11AI.98169**

Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **35.00**

**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 21 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Arthur A Clark Jr</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98194</b>
Mailing Address 412 N 4th St			Amount of Each Receipt this Period 5.00
City TACOMA	State WA	Zip Code 98403	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00		

Full Name (Last, First, Middle Initial) <b>B. Arthur A Clark Jr</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98204</b>
Mailing Address 412 N 4th St			Amount of Each Receipt this Period 5.00
City TACOMA	State WA	Zip Code 98403	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 225.00		

Full Name (Last, First, Middle Initial) <b>C. JAKE COLLEN</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98222</b>
Mailing Address 4602 69TH AVE W			Amount of Each Receipt this Period 10.00
City UNIVERSITY PLACE	State WA	Zip Code 98466	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> 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 22 OF 102
	<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

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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. JAKE COLLEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4602 69TH AVE W

City UNIVERSITY PLACE	State WA	Zip Code 98466
--------------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		17		2015

**Transaction ID : SA11AI.98224**

Amount of Each Receipt this Period  
10.00

**B. JAKE COLLEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4602 69TH AVE W

City UNIVERSITY PLACE	State WA	Zip Code 98466
--------------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		17		2015

**Transaction ID : SA11AI.98226**

Amount of Each Receipt this Period  
10.00

**C. JAKE COLLEN**  
Full Name (Last, First, Middle Initial)  
Mailing Address 4602 69TH AVE W

City UNIVERSITY PLACE	State WA	Zip Code 98466
--------------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11		23		2015

**Transaction ID : SA11AI.98228**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 23 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 4602 69TH AVE W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.98230**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 23406 - 108st St Ct E

City BUCKLEY State CA Zip Code 98321

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.97860**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 23406 - 108st St Ct E

City BUCKLEY State CA Zip Code 98321

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.97861**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 24 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 23406 - 108st St Ct E

City BUCKLEY	State CA	Zip Code 98321
-----------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.97862**

Amount of Each Receipt this Period  

10.00
-------

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

Mailing Address 23406 - 108st St Ct E

City BUCKLEY	State CA	Zip Code 98321
-----------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **480.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.97863**

Amount of Each Receipt this Period  

10.00
-------

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

Mailing Address 23406 - 108st St Ct E

City BUCKLEY	State CA	Zip Code 98321
-----------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **490.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.97864**

Amount of Each Receipt this Period  

10.00
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<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> 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 25 OF 102
	<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	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GERI R CRANSTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1917 NE 70TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	03	/	2015

**Transaction ID : SA11AI.98043**

Amount of Each Receipt this Period  
5.00

**B. GERI R CRANSTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1917 NE 70TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

**Transaction ID : SA11AI.98050**

Amount of Each Receipt this Period  
5.00

**C. GERI R CRANSTON**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1917 NE 70TH AVE

City PORTLAND	State OR	Zip Code 97213
------------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.98057**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 26 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GERI R CRANSTON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1917 NE 70TH AVE  
 City PORTLAND State OR Zip Code 97213  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2015  
**Transaction ID : SA11AI.98064**  
 Amount of Each Receipt this Period  
 5.00

**B. GEORGE R CRIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 LA GRANDE BLVD  
 City PUYALLUP State WA Zip Code 98373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98069**  
 Amount of Each Receipt this Period  
 10.00

**C. GEORGE R CRIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 LA GRANDE BLVD  
 City PUYALLUP State WA Zip Code 98373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98073**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 27 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GEORGE R CRIM**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 718 LA GRANDE BLVD  
 City PUYALLUP State WA Zip Code 98373  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98079**  
 Amount of Each Receipt this Period  
 10.00

**B. STEWART CROCKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4819 N MCBRIDE ST  
 City TACOMA State WA Zip Code 98407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 675.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98174**  
 Amount of Each Receipt this Period  
 15.00

**C. STEWART CROCKETT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4819 N MCBRIDE ST  
 City TACOMA State WA Zip Code 98407  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 690.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98182**  
 Amount of Each Receipt this Period  
 15.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 28 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. STEWART CROCKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015
Mailing Address 4819 N MCBRIDE ST		<b>Transaction ID : SA11AI.98190</b>
City TACOMA	State WA	Zip Code 98407
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 705.00	

Full Name (Last, First, Middle Initial) <b>B. STEWART CROCKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015
Mailing Address 4819 N MCBRIDE ST		<b>Transaction ID : SA11AI.98200</b>
City TACOMA	State WA	Zip Code 98407
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 720.00	

Full Name (Last, First, Middle Initial) <b>C. STEWART CROCKETT</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015
Mailing Address 4819 N MCBRIDE ST		<b>Transaction ID : SA11AI.98210</b>
City TACOMA	State WA	Zip Code 98407
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 15.00
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 735.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	45.00
<b>TOTAL</b> 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 29 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.98106</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="250.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.98116</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="255.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. LYNN DE LUCA</b>		Date of Receipt
Mailing Address 2223 JACK PL		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code
SAN PEDRO	CA	90731-1128
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.98125</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="260.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="15.00"/>
<b>TOTAL</b> 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 30 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. LYNN DE LUCA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2223 JACK PL  
 City SAN PEDRO State CA Zip Code 90731-1128  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 265.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98135**  
 Amount of Each Receipt this Period  
 5.00

**B. Michael De Luca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2223 JACK PLACE  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Foreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.98103**  
 Amount of Each Receipt this Period  
 5.00

**C. Michael De Luca**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2223 JACK PLACE  
 City SAN PEDRO State CA Zip Code 90731  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Foreman  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98112**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15.00  
**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 31 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 2223 JACK PLACE

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Foreman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : SA11AI.98121**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 2223 JACK PLACE

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Foreman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 25 / 2015**

**Transaction ID : SA11AI.98131**

Amount of Each Receipt this Period  
**5.00**

**c. 7 Jerrybeth De Mello**  
Full Name (Last, First, Middle Initial)

Mailing Address 1273 Nahale St

City LAHAINA State HI Zip Code 96761-1749

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

Name of Employer ILWU 142 Occupation Local Rep

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 17 / 2015**

**Transaction ID : SA11AI.97948**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **20.00**

**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 32 OF 102
	<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	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. 7 Jerrybeth De Mello**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1273 Nahale St  
 City LAHAINA State HI Zip Code 96761-1749  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Local Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97949**  
 Amount of Each Receipt this Period  
 10.00

**B. Donna Domingo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2824 Kauhale St  
 City KIHEI State HI Zip Code 96753-9634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 525.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97939**  
 Amount of Each Receipt this Period  
 25.00

**C. Donna Domingo**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2824 Kauhale St  
 City KIHEI State HI Zip Code 96753-9634  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Vice President  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97940**  
 Amount of Each Receipt this Period  
 25.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 60.00  
**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 33 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1727 - 246th ST

City LOMITA State CA Zip Code 90717

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 05 / 2015**

**Transaction ID : SA11AI.98102**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 1727 - 246th ST

City LOMITA State CA Zip Code 90717

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 12 / 2015**

**Transaction ID : SA11AI.98111**

Amount of Each Receipt this Period  
**5.00**

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

Mailing Address 1727 - 246th ST

City LOMITA State CA Zip Code 90717

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 19 / 2015**

**Transaction ID : SA11AI.98120**

Amount of Each Receipt this Period  
**5.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **15.00**

**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 34 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MICHAEL S. EINSTOSS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1727 - 246th ST  
 City LOMITA State CA Zip Code 90717  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98130**  
 Amount of Each Receipt this Period  
 5.00

**B. DAVID G ELLIOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52042 SE Icenogle Loop  
 City SCAPPOOSE State OR Zip Code 97056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : SA11AI.98140**  
 Amount of Each Receipt this Period  
 10.00

**C. DAVID G ELLIOTT**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 52042 SE Icenogle Loop  
 City SCAPPOOSE State OR Zip Code 97056  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98142**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	25.00
<b>TOTAL</b> 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 35 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID G ELLIOTT</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98144</b>
Mailing Address 52042 SE Icenogle Loop		Amount of Each Receipt this Period 10.00
City SCAPPOOSE	State OR	Zip Code 97056
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00	

Full Name (Last, First, Middle Initial) <b>B. DAVID G ELLIOTT</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 24 / 2015 <b>Transaction ID : SA11AI.98146</b>
Mailing Address 52042 SE Icenogle Loop		Amount of Each Receipt this Period 10.00
City SCAPPOOSE	State OR	Zip Code 97056
FEC ID number of contributing federal political committee. C		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) <b>C. Brent W Ericksen</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97882</b>
Mailing Address 1029 PRINCETON ST		Amount of Each Receipt this Period 10.00
City TACOMA	State WA	Zip Code 98466
FEC ID number of contributing federal political committee. C		
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 440.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 36 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Brent W Ericksen</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97883</b>		
Mailing Address 1029 PRINCETON ST			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98466			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

Full Name (Last, First, Middle Initial) <b>B. Brent W Ericksen</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97884</b>		
Mailing Address 1029 PRINCETON ST			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98466			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00			

Full Name (Last, First, Middle Initial) <b>C. Brent W Ericksen</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.97885</b>		
Mailing Address 1029 PRINCETON ST			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98466			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 37 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Brent W Ericksen</b>			Date of Receipt
Mailing Address 1029 PRINCETON ST			<input type="text" value="11"/> / <input type="text" value="23"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97886</b>
TACOMA	WA	98466	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
PMA	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="480.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. TEDDY B ESPELETA</b>			Date of Receipt
Mailing Address 1126-A Aala PI			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98006</b>
MAKAWAO	HI	96768-9604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
ILWU 142	Local Rep		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. TEDDY B ESPELETA</b>			Date of Receipt
Mailing Address 1126-A Aala PI			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98007</b>
MAKAWAO	HI	96768-9604	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
ILWU 142	Local Rep		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="550.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
<b>TOTAL</b> 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 38 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. GEORGE M ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14819 SE BUSH ST  
 City PORTLAND State OR Zip Code 97236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : SA11AI.98042**  
 Amount of Each Receipt this Period  
 5.00

**B. GEORGE M ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14819 SE BUSH ST  
 City PORTLAND State OR Zip Code 97236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98049**  
 Amount of Each Receipt this Period  
 5.00

**C. GEORGE M ESPINOZA**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 14819 SE BUSH ST  
 City PORTLAND State OR Zip Code 97236  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98056**  
 Amount of Each Receipt this Period  
 5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 39 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. GEORGE M ESPINOZA</b>		Date of Receipt
Mailing Address 14819 SE BUSH ST		<input type="text" value="11"/> / <input type="text" value="24"/> / <input type="text" value="2015"/>
City	State	Zip Code
PORTLAND	OR	97236
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.98063</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="5.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Longshore Worker	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="235.00"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. CATHERINE FAMILATHE</b>		Date of Receipt
Mailing Address 23754 PASATIEMPO LN		<input type="text" value="11"/> / <input type="text" value="05"/> / <input type="text" value="2015"/>
City	State	Zip Code
HARBOR CITY	CA	90710-1414
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.97898</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Clerk	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="369.98"/>	
<input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. CATHERINE FAMILATHE</b>		Date of Receipt
Mailing Address 23754 PASATIEMPO LN		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City	State	Zip Code
HARBOR CITY	CA	90710-1414
FEC ID number of contributing federal political committee.		Transaction ID : <b>SA11AI.97902</b>
<input type="text" value="C"/>		Amount of Each Receipt this Period
		<input type="text" value="10.00"/>
Name of Employer	Occupation	
Pacific Maritime Association	Clerk	
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="379.98"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="25.00"/>
<b>TOTAL</b> 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 40 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 23754 PASATIEMPO LN

City State Zip Code  
 HARBOR CITY CA 90710-1414

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

Name of Employer Occupation  
 Pacific Maritime Association Clerk

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 389.98

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015

**Transaction ID : SA11AI.97906**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 23754 PASATIEMPO LN

City State Zip Code  
 HARBOR CITY CA 90710-1414

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

Name of Employer Occupation  
 Pacific Maritime Association Clerk

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 399.98

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015

**Transaction ID : SA11AI.97910**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 95-967 Uku Wai St., #3707

City State Zip Code  
 MILILANI HI 96789-6959

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

Name of Employer Occupation  
 ILWU Local 142 Union Representative

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
 220.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.98008**

Amount of Each Receipt this Period  
 10.50

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.50

**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 41 OF 102
	<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	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Paris Fernandez</b>			Date of Receipt
Mailing Address 95-967 Uku Wai St., #3707			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City MILILANI	State HI	Zip Code 96789-6959	<b>Transaction ID : SA11AI.98009</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="10.50"/>
Name of Employer ILWU Local 142	Occupation Union Representative		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="231.00"/>		

Full Name (Last, First, Middle Initial) <b>B. 1 Guy Fujimura</b>			Date of Receipt
Mailing Address PO BOX 13094			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City AIEA	State HI	Zip Code 96701-8594	<b>Transaction ID : SA11AI.97847</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer ILWU 142	Occupation Secty -Treas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="525.00"/>		

Full Name (Last, First, Middle Initial) <b>C. 1 Guy Fujimura</b>			Date of Receipt
Mailing Address PO BOX 13094			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City AIEA	State HI	Zip Code 96701-8594	<b>Transaction ID : SA11AI.97848</b>
FEC ID number of contributing federal political committee. <input type="text" value="C"/>			Amount of Each Receipt this Period <input type="text" value="25.00"/>
Name of Employer ILWU 142	Occupation Secty -Treas		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="550.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.50"/>
<b>TOTAL</b> 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 42 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.61

Date of Receipt 11 / 12 / 2015  
**Transaction ID : SA11AI.97985**

Amount of Each Receipt this Period 5.00

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

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 263.61

Date of Receipt 11 / 19 / 2015  
**Transaction ID : SA11AI.97991**

Amount of Each Receipt this Period 5.00

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

Mailing Address 3507 EAST 15TH STREET

City LONG BEACH State CA Zip Code 90804

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 268.61

Date of Receipt 11 / 25 / 2015  
**Transaction ID : SA11AI.97997**

Amount of Each Receipt this Period 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15.00

**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 43 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. BOBBY J GUILLORY**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1910 ARGONNE Dr  
 City WALNUT CREEK State CA Zip Code 94598  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Retired  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98245**  
 Amount of Each Receipt this Period  
 50.00

**B. Ronald Hakanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3715 N 11TH ST  
 City TACOMA State WA Zip Code 98406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98173**  
 Amount of Each Receipt this Period  
 12.50

**C. Ronald Hakanson**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 3715 N 11TH ST  
 City TACOMA State WA Zip Code 98406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 462.50

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98181**  
 Amount of Each Receipt this Period  
 12.50

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 44 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **475.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 17 / 2015**

**Transaction ID : SA11AI.98189**

Amount of Each Receipt this Period  
**12.50**

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

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **487.50**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2015**

**Transaction ID : SA11AI.98199**

Amount of Each Receipt this Period  
**12.50**

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

Mailing Address 3715 N 11TH ST

City TACOMA State WA Zip Code 98406

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **500.00**

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
**11 / 23 / 2015**

**Transaction ID : SA11AI.98209**

Amount of Each Receipt this Period  
**12.50**

**SUBTOTAL** of Receipts This Page (optional)..... **37.50**

**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 45 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 03 / 2015**

**Transaction ID : SA11AI.98017**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 12 / 2015**

**Transaction ID : SA11AI.98018**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **230.00**

Date of Receipt **11 / 17 / 2015**

**Transaction ID : SA11AI.98019**

Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **15.00**

**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 46 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 19280 Berry Lane

City NEWBERG State OR Zip Code 97132

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt 11 / 24 / 2015  
**Transaction ID : SA11AI.98020**

Amount of Each Receipt this Period 5.00

**B. TERRI L HEATH-GALTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 OAKHEATH DRIVE

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt 11 / 05 / 2015  
**Transaction ID : SA11AI.97899**

Amount of Each Receipt this Period 5.00

**C. TERRI L HEATH-GALTMAN**  
Full Name (Last, First, Middle Initial)

Mailing Address 1153 OAKHEATH DRIVE

City HARBOR CITY State CA Zip Code 90710

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 225.00

Date of Receipt 11 / 12 / 2015  
**Transaction ID : SA11AI.97903**

Amount of Each Receipt this Period 5.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 15.00

**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 47 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. TERRI L HEATH-GALTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1153 OAKHEATH DRIVE  
 City HARBOR CITY State CA Zip Code 90710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.97907**  
 Amount of Each Receipt this Period  
 5.00

**B. TERRI L HEATH-GALTMAN**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1153 OAKHEATH DRIVE  
 City HARBOR CITY State CA Zip Code 90710  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.97911**  
 Amount of Each Receipt this Period  
 5.00

**C. Anna Herrera**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4527 Linden  
 City LONG BEACH State CA Zip Code 90807  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 430.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.97984**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	20.00
<b>TOTAL</b> 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 48 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Anna Herrera</b>			Date of Receipt
Mailing Address 4527 Linden			<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97990</b>
LONG BEACH	CA	90807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="440.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Anna Herrera</b>			Date of Receipt
Mailing Address 4527 Linden			<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97996</b>
LONG BEACH	CA	90807	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="10.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="450.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Dillon M Hullinger</b>			Date of Receipt
Mailing Address 320 Ohua Ave #602			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.97920</b>
HONOLULU	HI	96815-3661	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="25.00"/>
Name of Employer	Occupation		
ILWU Local 142	Union Officer		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="525.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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 49 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Dillon M Hullinger</b>		Date of Receipt
Mailing Address 320 Ohua Ave #602		<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City HONOLULU	State HI	Zip Code 96815-3661
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97921</b>
Name of Employer ILWU Local 142		Amount of Each Receipt this Period
Occupation Union Officer		<input type="text" value="2500"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="550.00"/>	

Full Name (Last, First, Middle Initial) <b>B. WALTER A INGERSOLL</b>		Date of Receipt
Mailing Address PO BOX 370 LOT U		<input type="text" value="11"/> / <input type="text" value="03"/> / <input type="text" value="2015"/>
City ORANGE LAKE	State FL	Zip Code 32681
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98030</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="1000"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="440.00"/>	

Full Name (Last, First, Middle Initial) <b>C. WALTER A INGERSOLL</b>		Date of Receipt
Mailing Address PO BOX 370 LOT U		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City ORANGE LAKE	State FL	Zip Code 32681
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.98031</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="1000"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
	<input type="text" value="450.00"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="45.00"/>
<b>TOTAL</b> 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 50 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98032**  
 Amount of Each Receipt this Period  
 10.00

**B. WALTER A INGERSOLL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address PO BOX 370  
 LOT U  
 City ORANGE LAKE State FL Zip Code 32681  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 24 / 2015  
**Transaction ID : SA11AI.98033**  
 Amount of Each Receipt this Period  
 10.00

**C. CARMEN JOHNSON**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 4502 N 21st St  
 City TACOMA State WA Zip Code 98406  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98170**  
 Amount of Each Receipt this Period  
 10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 51 OF 102
	<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	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 4502 N 21st St

City TACOMA State WA Zip Code 98406

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98178**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 4502 N 21st St

City TACOMA State WA Zip Code 98406

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98186**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 4502 N 21st St

City TACOMA State WA Zip Code 98406

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98195**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 52 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. CARMEN JOHNSON</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98205</b>
Mailing Address 4502 N 21st St		Amount of Each Receipt this Period 10.00
City TACOMA	State WA	Zip Code 98406
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 490.00	

Full Name (Last, First, Middle Initial) <b>B. Joanne Kealoha</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97922</b>
Mailing Address 1023 Kapahulu Ave #18		Amount of Each Receipt this Period 60.00
City HONOLULU	State HI	Zip Code 96816-1330
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer ILWU 142	Occupation Local Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00	

Full Name (Last, First, Middle Initial) <b>C. DAVID KING</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98171</b>
Mailing Address 3563 E J St		Amount of Each Receipt this Period 10.00
City TACOMA	State WA	Zip Code 98404
FEC ID number of contributing federal political committee. <b>C</b>		
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 340.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> 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 53 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID KING</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98179</b>		
Mailing Address 3563 E J St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98404			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 350.00			

Full Name (Last, First, Middle Initial) <b>B. DAVID KING</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98187</b>		
Mailing Address 3563 E J St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98404			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 360.00			

Full Name (Last, First, Middle Initial) <b>C. DAVID KING</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98196</b>		
Mailing Address 3563 E J St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98404			
FEC ID number of contributing federal political committee. C					
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 370.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 54 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID KING</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98206</b>
Mailing Address 3563 E J St			Amount of Each Receipt this Period 10.00
City TACOMA	State WA	Zip Code 98404	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 380.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Daniel Kitts</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98066</b>
Mailing Address 1006 - 17th St NW			Amount of Each Receipt this Period 10.00
City PUYALLUP	State WA	Zip Code 98371	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 420.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Daniel Kitts</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98070</b>
Mailing Address 1006 - 17th St NW			Amount of Each Receipt this Period 10.00
City PUYALLUP	State WA	Zip Code 98371	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 430.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 55 OF 102
<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Daniel Kitts</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98074</b>	
Mailing Address 1006 - 17th St NW			Amount of Each Receipt this Period 10.00	
City PUYALLUP	State WA	Zip Code 98371		
FEC ID number of contributing federal political committee. C				
Name of Employer Pacific Maritime Association		Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00		

Full Name (Last, First, Middle Initial) <b>B. Daniel Kitts</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98077</b>	
Mailing Address 1006 - 17th St NW			Amount of Each Receipt this Period 10.00	
City PUYALLUP	State WA	Zip Code 98371		
FEC ID number of contributing federal political committee. C				
Name of Employer Pacific Maritime Association		Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. Daniel Kitts</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98080</b>	
Mailing Address 1006 - 17th St NW			Amount of Each Receipt this Period 10.00	
City PUYALLUP	State WA	Zip Code 98371		
FEC ID number of contributing federal political committee. C				
Name of Employer Pacific Maritime Association		Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 56 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. 1 Desmond A Kochi</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97932</b>
Mailing Address 45-340 Kenela St			Amount of Each Receipt this Period 25.00
City KANE OHE	State HI	Zip Code 96744	
FEC ID number of contributing federal political committee. C			
Name of Employer ILWU 142	Occupation Div Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00		

Full Name (Last, First, Middle Initial) <b>B. 1 Desmond A Kochi</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97933</b>
Mailing Address 45-340 Kenela St			Amount of Each Receipt this Period 25.00
City KANE OHE	State HI	Zip Code 96744	
FEC ID number of contributing federal political committee. C			
Name of Employer ILWU 142	Occupation Div Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00		

Full Name (Last, First, Middle Initial) <b>C. RICHARD J KREBSER</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98217</b>
Mailing Address 6211 BLACK LAKE BELMORE Rd SW			Amount of Each Receipt this Period 10.00
City OLYMPIA	State WA	Zip Code 98512	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 370.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 57 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City	State	Zip Code
OLYMPIA	WA	98512

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **380.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.98218**

Amount of Each Receipt this Period  

10.00
-------

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

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City	State	Zip Code
OLYMPIA	WA	98512

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **390.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.98219**

Amount of Each Receipt this Period  

10.00
-------

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

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City	State	Zip Code
OLYMPIA	WA	98512

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

Name of Employer	Occupation
Pacific Maritime Association	Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **400.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.98220**

Amount of Each Receipt this Period  

10.00
-------

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> 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 58 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 6211 BLACK LAKE BELMORE Rd SW

City OLYMPIA State WA Zip Code 98512

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **410.00**

Date of Receipt **11 / 23 / 2015**

**Transaction ID : SA11AI.98221**

Amount of Each Receipt this Period **100.00**

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

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD State CA Zip Code 90713

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **600.00**

Date of Receipt **11 / 12 / 2015**

**Transaction ID : SA11AI.97956**

Amount of Each Receipt this Period **15.00**

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

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD State CA Zip Code 90713

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **615.00**

Date of Receipt **11 / 19 / 2015**

**Transaction ID : SA11AI.97958**

Amount of Each Receipt this Period **15.00**

**SUBTOTAL** of Receipts This Page (optional)..... **40.00**

**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 59 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 4102 MONOGRAM AVE

City LAKEWOOD State CA Zip Code 90713

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **630.00**

Date of Receipt **11 / 25 / 2015**

**Transaction ID : SA11AI.97960**

Amount of Each Receipt this Period **15.00**

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

Mailing Address 12691 MARTHA ANN DR

City LOS ALAMITOS State CA Zip Code 90720

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **220.00**

Date of Receipt **11 / 05 / 2015**

**Transaction ID : SA11AI.98001**

Amount of Each Receipt this Period **5.00**

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

Mailing Address 12691 MARTHA ANN DR

City LOS ALAMITOS State CA Zip Code 90720

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **225.00**

Date of Receipt **11 / 12 / 2015**

**Transaction ID : SA11AI.98002**

Amount of Each Receipt this Period **5.00**

**SUBTOTAL** of Receipts This Page (optional)..... **25.00**

**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 60 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MARVIN LAGARDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12691 MARTHA ANN DR  
 City LOS ALAMITOS State CA Zip Code 90720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98003**  
 Amount of Each Receipt this Period  
 5.00

**B. MARVIN LAGARDE**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 12691 MARTHA ANN DR  
 City LOS ALAMITOS State CA Zip Code 90720  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98004**  
 Amount of Each Receipt this Period  
 5.00

**C. GRANT LANDERS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1810 DONAVAN AVE  
 City BELLINGHAM State WA Zip Code 98225  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97859**  
 Amount of Each Receipt this Period  
 50.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 61 OF 102
	<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	

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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1473 W SEPULVEDA ST

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt **11 / 05 / 2015**

**Transaction ID : SA11AI.98105**

Amount of Each Receipt this Period **10.00**

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

Mailing Address 1473 W SEPULVEDA ST

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt **11 / 12 / 2015**

**Transaction ID : SA11AI.98115**

Amount of Each Receipt this Period **10.00**

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

Mailing Address 1473 W SEPULVEDA ST

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt **11 / 19 / 2015**

**Transaction ID : SA11AI.98124**

Amount of Each Receipt this Period **10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **30.00**

**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 62 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1473 W SEPULVEDA ST

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **470.00**

Date of Receipt  
11 / 25 / 2015  
**Transaction ID : SA11AI.98134**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1829 BARDALE Av

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Foreman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **344.00**

Date of Receipt  
11 / 05 / 2015  
**Transaction ID : SA11AI.98101**

Amount of Each Receipt this Period  
**8.00**

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

Mailing Address 1829 BARDALE Av

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Foreman

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **352.00**

Date of Receipt  
11 / 12 / 2015  
**Transaction ID : SA11AI.98110**

Amount of Each Receipt this Period  
**8.00**

**SUBTOTAL** of Receipts This Page (optional)..... **26.00**

**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 63 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. ANTHONY LUERA</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 19 / 2015 <b>Transaction ID : SA11AI.98119</b>
Mailing Address 1829 BARDALE Av			Amount of Each Receipt this Period 8.00
City SAN PEDRO	State CA	Zip Code 90731	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 360.00
Name of Employer Pacific Maritime Association		Occupation Foreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. ANTHONY LUERA</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 25 / 2015 <b>Transaction ID : SA11AI.98129</b>
Mailing Address 1829 BARDALE Av			Amount of Each Receipt this Period 8.00
City SAN PEDRO	State CA	Zip Code 90731	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 368.00
Name of Employer Pacific Maritime Association		Occupation Foreman	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. MICHAEL C MACHADO</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97935</b>
Mailing Address PO Box 1287			Amount of Each Receipt this Period 20.00
City KAPAA	State HI	Zip Code 96746-7287	
FEC ID number of contributing federal political committee. C			Aggregate Year-to-Date ▼ 220.00
Name of Employer ILWU 142		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	36.00
<b>TOTAL</b> 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 64 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. MELVIN S MCCA</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98172</b>		
Mailing Address 101 S 62nd St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98408			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 450.00			

Full Name (Last, First, Middle Initial) <b>B. MELVIN S MCCA</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98180</b>		
Mailing Address 101 S 62nd St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98408			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 460.00			

Full Name (Last, First, Middle Initial) <b>C. MELVIN S MCCA</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98188</b>		
Mailing Address 101 S 62nd St			Amount of Each Receipt this Period 10.00		
City TACOMA	State WA	Zip Code 98408			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 470.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 65 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 101 S 62nd St

City TACOMA State WA Zip Code 98408

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.98197**

Amount of Each Receipt this Period  
 10.00

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

Mailing Address 101 S 62nd St

City TACOMA State WA Zip Code 98408

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

Name of Employer PMA Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.98207**

Amount of Each Receipt this Period  
 10.00

**C. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 370.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.98223**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 66 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.98225**

Amount of Each Receipt this Period  
 10.00

**B. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.98227**

Amount of Each Receipt this Period  
 10.00

**C. SCOTT L MC NABB**  
Full Name (Last, First, Middle Initial)

Mailing Address 2304 SUNSET DR W

City UNIVERSITY PLACE State WA Zip Code 98466

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015

**Transaction ID : SA11AI.98229**

Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 67 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SCOTT L MC NABB**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2304 SUNSET DR W  
 City State Zip Code  
 UNIVERSITY PLACE WA 98466  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 PMA Longshore worker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 410.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98231**  
 Amount of Each Receipt this Period  
 10.00

**B. DONALD A. MEHNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16600 SE BEL AIR DR  
 City State Zip Code  
 CLACKAMAS OR 97015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pacific Maritime Association Longshore Worker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : SA11AI.97867**  
 Amount of Each Receipt this Period  
 5.00

**C. DONALD A. MEHNER**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 16600 SE BEL AIR DR  
 City State Zip Code  
 CLACKAMAS OR 97015  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pacific Maritime Association Longshore Worker  
 Receipt For:  
 Primary  General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 225.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.97869**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20.00  
**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 68 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 16600 SE BEL AIR DR

City CLACKAMAS State OR Zip Code 97015

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 230.00

Date of Receipt  
11 / 17 / 2015  
**Transaction ID : SA11AI.97871**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 16600 SE BEL AIR DR

City CLACKAMAS State OR Zip Code 97015

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 235.00

Date of Receipt  
11 / 24 / 2015  
**Transaction ID : SA11AI.97873**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO State CA Zip Code 90732

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
11 / 05 / 2015  
**Transaction ID : SA11AI.98104**

Amount of Each Receipt this Period  
5.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 15.00

**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 69 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO	State CA	Zip Code 90732
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98114**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO	State CA	Zip Code 90732
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98123**

Amount of Each Receipt this Period  
5.00

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

Mailing Address 1210 SUNSIDE ST

City SAN PEDRO	State CA	Zip Code 90732
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
235.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98133**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 70 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. PHILIP MLADINICH**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7754

City LAGUNA NIGUEL	State CA	Zip Code 92607
-----------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
210.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	05	/	2015

**Transaction ID : SA11AI.97944**

Amount of Each Receipt this Period  
5.00

**B. PHILIP MLADINICH**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7754

City LAGUNA NIGUEL	State CA	Zip Code 92607
-----------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
215.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

**Transaction ID : SA11AI.97945**

Amount of Each Receipt this Period  
5.00

**C. PHILIP MLADINICH**  
Full Name (Last, First, Middle Initial)  
Mailing Address P.O. BOX 7754

City LAGUNA NIGUEL	State CA	Zip Code 92607
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FEC ID number of contributing federal political committee. **C**

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
220.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2015

**Transaction ID : SA11AI.97946**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 71 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. PHILIP MLADINICH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address P.O. BOX 7754  
 City LAGUNA NIGUEL State CA Zip Code 92607  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.97947**  
 Amount of Each Receipt this Period  
 5.00

**B. WENDY MONROY STAVROS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VIA NOVA  
 City LOMITA State CA Zip Code 90717-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 210.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.97967**  
 Amount of Each Receipt this Period  
 5.00

**C. WENDY MONROY STAVROS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VIA NOVA  
 City LOMITA State CA Zip Code 90717-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 215.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.97969**  
 Amount of Each Receipt this Period  
 5.00

**SUBTOTAL** of Receipts This Page (optional)..... ► 15.00  
**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 72 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. WENDY MONROY STAVROS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VIA NOVA  
 City LOMITA State CA Zip Code 90717-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.97972**  
 Amount of Each Receipt this Period  
 5.00

**B. WENDY MONROY STAVROS**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2008 VIA NOVA  
 City LOMITA State CA Zip Code 90717-3636  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 225.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.97975**  
 Amount of Each Receipt this Period  
 5.00

**C. ROBERT NEWELL**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 5309 PEARCE AVE  
 City LAKEWOOD State CA Zip Code 90712  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.97955**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 20.00  
**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 73 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. ROBERT NEWELL</b>		Date of Receipt
Mailing Address 5309 PEARCE AVE		<input type="text" value="11"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City LAKEWOOD	State CA	Zip Code 90712
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97957</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="450.00"/>		

Full Name (Last, First, Middle Initial) <b>B. ROBERT NEWELL</b>		Date of Receipt
Mailing Address 5309 PEARCE AVE		<input type="text" value="11"/> / <input type="text" value="19"/> / <input type="text" value="2015"/>
City LAKEWOOD	State CA	Zip Code 90712
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97959</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="460.00"/>		

Full Name (Last, First, Middle Initial) <b>C. ROBERT NEWELL</b>		Date of Receipt
Mailing Address 5309 PEARCE AVE		<input type="text" value="11"/> / <input type="text" value="25"/> / <input type="text" value="2015"/>
City LAKEWOOD	State CA	Zip Code 90712
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA11AI.97961</b>
Name of Employer Pacific Maritime Association		Amount of Each Receipt this Period
Occupation Longshore Worker		<input type="text" value="10.00"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text" value="470.00"/>		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="30.00"/>
<b>TOTAL</b> 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 74 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Arne Nielsen</b>			Date of Receipt 11 / 17 / 2015 <b>Transaction ID : SA11AI.98176</b>
Mailing Address 6208 - 4th St NE			Amount of Each Receipt this Period 60.00
City TACOMA	State WA	Zip Code 98422	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2700.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Arne Nielsen</b>			Date of Receipt 11 / 17 / 2015 <b>Transaction ID : SA11AI.98184</b>
Mailing Address 6208 - 4th St NE			Amount of Each Receipt this Period 60.00
City TACOMA	State WA	Zip Code 98422	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2760.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Arne Nielsen</b>			Date of Receipt 11 / 17 / 2015 <b>Transaction ID : SA11AI.98192</b>
Mailing Address 6208 - 4th St NE			Amount of Each Receipt this Period 60.00
City TACOMA	State WA	Zip Code 98422	
FEC ID number of contributing federal political committee. C		Aggregate Year-to-Date ▼ 2820.00	
Name of Employer Pacific Maritime Association		Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	180.00
<b>TOTAL</b> 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 75 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Arne Nielsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6208 - 4th St NE  
 City TACOMA State WA Zip Code 98422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2880.00**

Date of Receipt  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98202**  
 Amount of Each Receipt this Period  
**60.00**

**B. Arne Nielsen**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 6208 - 4th St NE  
 City TACOMA State WA Zip Code 98422  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Longshore Worker  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **2940.00**

Date of Receipt  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98212**  
 Amount of Each Receipt this Period  
**60.00**

**C. FRANK NORTH**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1325 GRANADA AVE  
 City LONG BEACH State CA Zip Code 90804  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Foreman  
 Receipt For:  Primary  General  Other (specify)   
 Aggregate Year-to-Date **420.00**

Date of Receipt  
 11 / 05 / 2015  
**Transaction ID : SA11AI.97979**  
 Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **130.00**  
**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 76 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
430.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

**Transaction ID : SA11AI.97983**

Amount of Each Receipt this Period  
10.00

**B. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
440.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	19	/	2015

**Transaction ID : SA11AI.97989**

Amount of Each Receipt this Period  
10.00

**C. FRANK NORTH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1325 GRANADA AVE

City LONG BEACH	State CA	Zip Code 90804
--------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Foreman
--	-----------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	25	/	2015

**Transaction ID : SA11AI.97995**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 77 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Eadie Omonaka</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97923</b>
Mailing Address 2115 Haena Drive			Amount of Each Receipt this Period 60.00
City HONOLULU	State HI	Zip Code 96822	
FEC ID number of contributing federal political committee. C			
Name of Employer ILWU 142	Occupation Local Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 660.00		

Full Name (Last, First, Middle Initial) <b>B. MARK S OWENS</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98025</b>
Mailing Address PO BOX 2819			Amount of Each Receipt this Period 10.00
City OLYMPIA	State WA	Zip Code 98501	
FEC ID number of contributing federal political committee. C			
Name of Employer PMA	Occupation Longshore worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00		

Full Name (Last, First, Middle Initial) <b>C. MARK S OWENS</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98026</b>
Mailing Address PO BOX 2819			Amount of Each Receipt this Period 10.00
City OLYMPIA	State WA	Zip Code 98501	
FEC ID number of contributing federal political committee. C			
Name of Employer PMA	Occupation Longshore worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 460.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	80.00
<b>TOTAL</b> 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 78 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)  
**A. MARK S OWENS**  
 Mailing Address PO BOX 2819  
 City OLYMPIA State WA Zip Code 98501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 470.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98027**  
 Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**B. MARK S OWENS**  
 Mailing Address PO BOX 2819  
 City OLYMPIA State WA Zip Code 98501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 480.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98028**  
 Amount of Each Receipt this Period  
 10.00

Full Name (Last, First, Middle Initial)  
**C. MARK S OWENS**  
 Mailing Address PO BOX 2819  
 City OLYMPIA State WA Zip Code 98501  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore worker  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 490.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 23 / 2015  
**Transaction ID : SA11AI.98029**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 79 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98175</b>
TACOMA	WA	98408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="880.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98183</b>
TACOMA	WA	98408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="900.00"/>		
<input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. Gary E Park</b>			Date of Receipt
Mailing Address 7603 Thompson Av			<input type="text" value="11"/> / <input type="text" value="17"/> / <input type="text" value="2015"/>
City	State	Zip Code	<b>Transaction ID : SA11AI.98191</b>
TACOMA	WA	98408	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>		<input type="text" value="20.00"/>
Name of Employer	Occupation		
Pacific Maritime Association	Longshore Worker		
Receipt For:	Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="920.00"/>		
<input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<input type="text" value="60.00"/>
<b>TOTAL</b> 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 80 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 7603 Thompson Av

City TACOMA State WA Zip Code 98408

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **940.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 23 / 2015**

**Transaction ID : SA11AI.98201**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 7603 Thompson Av

City TACOMA State WA Zip Code 98408

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **960.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 23 / 2015**

**Transaction ID : SA11AI.98211**

Amount of Each Receipt this Period  
**20.00**

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

Mailing Address 4123 NE Rodney

City PORTLAND State OR Zip Code 97211

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 03 / 2015**

**Transaction ID : SA11AI.98044**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... **50.00**

**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 81 OF 102
	<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

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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 4123 NE Rodney

City PORTLAND	State OR	Zip Code 97211
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	12	/	2015

**Transaction ID : SA11AI.98051**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 4123 NE Rodney

City PORTLAND	State OR	Zip Code 97211
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.98058**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 4123 NE Rodney

City PORTLAND	State OR	Zip Code 97211
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	24	/	2015

**Transaction ID : SA11AI.98065**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 82 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Augustin N Reyes Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98016</b>
Mailing Address 3007 Shelby Dr		Amount of Each Receipt this Period 500.00
City NATIONAL CITY	State CA	Zip Code 91950
FEC ID number of contributing federal political committee. C		
Name of Employer PMA	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>B. Claro P Romero Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98243</b>
Mailing Address PO Box 2552		Amount of Each Receipt this Period 25.00
City WAILUKU	State HI	Zip Code 96793-7552
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU 142	Occupation Div Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 525.00	

Full Name (Last, First, Middle Initial) <b>C. Claro P Romero Jr</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98244</b>
Mailing Address PO Box 2552		Amount of Each Receipt this Period 25.00
City WAILUKU	State HI	Zip Code 96793-7552
FEC ID number of contributing federal political committee. C		
Name of Employer ILWU 142	Occupation Div Rep	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 550.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	550.00
<b>TOTAL</b> 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 83 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 440.00

Date of Receipt  
11 / 05 / 2015  
**Transaction ID : SA11AI.98213**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 450.00

Date of Receipt  
11 / 12 / 2015  
**Transaction ID : SA11AI.98214**

Amount of Each Receipt this Period  
10.00

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

Mailing Address 2017 235TH PLACE

City TORRANCE State CA Zip Code 90501

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt  
11 / 19 / 2015  
**Transaction ID : SA11AI.98215**

Amount of Each Receipt this Period  
10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00

**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 84 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. DAVID A SERRATO</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 25 / 2015 <b>Transaction ID : SA11AI.98216</b>
Mailing Address 2017 235TH PLACE			Amount of Each Receipt this Period 10.00
City TORRANCE	State CA	Zip Code 90501	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00		

Full Name (Last, First, Middle Initial) <b>B. Rae C Shiraki</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97924</b>
Mailing Address 3510 Lelehune Place			Amount of Each Receipt this Period 12.50
City HONOLULU	State HI	Zip Code 96822	
FEC ID number of contributing federal political committee. C			
Name of Employer ILWU 142	Occupation Div Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50		

Full Name (Last, First, Middle Initial) <b>C. Rae C Shiraki</b>			Date of Receipt M M / D D / Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97925</b>
Mailing Address 3510 Lelehune Place			Amount of Each Receipt this Period 12.50
City HONOLULU	State HI	Zip Code 96822	
FEC ID number of contributing federal political committee. C			
Name of Employer ILWU 142	Occupation Div Rep		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	35.00
<b>TOTAL</b> 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 85 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. CECIL F SMITH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1101 SE 116th Ct

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
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Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
270.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	03	/	2015

**Transaction ID : SA11AI.98233**

Amount of Each Receipt this Period  
5.00

**B. CECIL F SMITH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1101 SE 116th Ct

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	12	/	2015

**Transaction ID : SA11AI.98235**

Amount of Each Receipt this Period  
5.00

**C. CECIL F SMITH**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1101 SE 116th Ct

City VANCOUVER	State WA	Zip Code 98683
-------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
280.00

Date of Receipt  

M M	/	D D	/	Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.98237**

Amount of Each Receipt this Period  
5.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	15.00
<b>TOTAL</b> 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 86 OF 102
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. CECIL F SMITH</b>			Date of Receipt 11 / 24 / 2015 <b>Transaction ID : SA11AI.98239</b>
Mailing Address 1101 SE 116th Ct			Amount of Each Receipt this Period 5.00
City VANCOUVER	State WA	Zip Code 98683	Aggregate Year-to-Date ▼ 285.00
FEC ID number of contributing federal political committee. C		Name of Employer Pacific Maritime Association	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Occupation Longshore Worker			

Full Name (Last, First, Middle Initial) <b>B. Eric Smith</b>			Date of Receipt 11 / 17 / 2015 <b>Transaction ID : SA11AI.98068</b>
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00
City Tacoma	State WA	Zip Code 98401	Aggregate Year-to-Date ▼ 1075.00
FEC ID number of contributing federal political committee. C		Name of Employer PMA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Occupation longshore			

Full Name (Last, First, Middle Initial) <b>C. Eric Smith</b>			Date of Receipt 11 / 17 / 2015 <b>Transaction ID : SA11AI.98072</b>
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00
City Tacoma	State WA	Zip Code 98401	Aggregate Year-to-Date ▼ 1100.00
FEC ID number of contributing federal political committee. C		Name of Employer PMA	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			
Occupation longshore			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	55.00
<b>TOTAL</b> 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 87 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Eric Smith</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.98076</b>		
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00		
City Tacoma	State WA	Zip Code 98401			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation longshore			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1125.00			

Full Name (Last, First, Middle Initial) <b>B. Eric Smith</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98078</b>		
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00		
City Tacoma	State WA	Zip Code 98401			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation longshore			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1150.00			

Full Name (Last, First, Middle Initial) <b>C. Eric Smith</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.98082</b>		
Mailing Address PO Box 701			Amount of Each Receipt this Period 25.00		
City Tacoma	State WA	Zip Code 98401			
FEC ID number of contributing federal political committee. C					
Name of Employer PMA		Occupation longshore			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1175.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	75.00
<b>TOTAL</b> 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 88 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1709 97th Avenue Ct E

City PUYALLUP State WA Zip Code 98371

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **440.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 17 / 2015**

**Transaction ID : SA11AI.98067**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1709 97th Avenue Ct E

City PUYALLUP State WA Zip Code 98371

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **450.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 17 / 2015**

**Transaction ID : SA11AI.98071**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1709 97th Avenue Ct E

City PUYALLUP State WA Zip Code 98371

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

Name of Employer PMA Occupation Longshore worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **460.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
**11 / 17 / 2015**

**Transaction ID : SA11AI.98075**

Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> 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 89 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. Richard Snell</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015
Mailing Address 1709 97th Avenue Ct E		<b>Transaction ID : SA11AI.98081</b>
City PUYALLUP	State WA	Zip Code 98371
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer PMA	Occupation Longshore worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

Full Name (Last, First, Middle Initial) <b>B. David Strader</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 23 / 2015
Mailing Address P.O. Box 68347		<b>Transaction ID : SA11AI.98038</b>
City Portland	State OR	Zip Code 97268
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 500.00
Name of Employer Pacific Maritime Association	Occupation longshore worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

Full Name (Last, First, Middle Initial) <b>C. MICHELLE VAN PATTEN</b>		Date of Receipt M M / D D / Y Y Y Y Y 11 / 05 / 2015
Mailing Address 1884 JAYBROOK DRIVE		<b>Transaction ID : SA11AI.98089</b>
City RANCHO P V	State CA	Zip Code 90275
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 10.00
Name of Employer Pacific Maritime Association	Occupation Longshore Worker	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 450.00	

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	520.00
<b>TOTAL</b> 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 90 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 460.00

Date of Receipt 11 / 12 / 2015  
**Transaction ID : SA11AI.98091**

Amount of Each Receipt this Period 10.00

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

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 470.00

Date of Receipt 11 / 19 / 2015  
**Transaction ID : SA11AI.98093**

Amount of Each Receipt this Period 10.00

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

Mailing Address 1884 JAYBROOK DRIVE

City RANCHO P V State CA Zip Code 90275

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 480.00

Date of Receipt 11 / 25 / 2015  
**Transaction ID : SA11AI.98095**

Amount of Each Receipt this Period 10.00

**SUBTOTAL** of Receipts This Page (optional).....▶ 30.00

**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 91 OF 102
	<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	

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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 05 / 2015  
**Transaction ID : SA11AI.98109**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98128**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 932 W PASEO DEL MAR

City SAN PEDRO State CA Zip Code 90731

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

Name of Employer Pacific Maritime Association Occupation Longshore Worker

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **340.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98138**

Amount of Each Receipt this Period  
**10.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>30.00</b>
<b>TOTAL</b> 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 92 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. MAX VEKICH Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2830 SW RAYMOND ST UNIT 201  
 City SEATTLE State WA Zip Code 98126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Marine Clerk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 380.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 12 / 2015  
**Transaction ID : SA11AI.98147**  
 Amount of Each Receipt this Period  
 10.00

**B. MAX VEKICH Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2830 SW RAYMOND ST UNIT 201  
 City SEATTLE State WA Zip Code 98126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Marine Clerk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 390.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 19 / 2015  
**Transaction ID : SA11AI.98149**  
 Amount of Each Receipt this Period  
 10.00

**C. MAX VEKICH Jr**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 2830 SW RAYMOND ST UNIT 201  
 City SEATTLE State WA Zip Code 98126  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Pacific Maritime Association Occupation Marine Clerk  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
 M M / D D / Y Y Y Y Y Y  
 11 / 25 / 2015  
**Transaction ID : SA11AI.98151**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 30.00  
**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 93 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1101 BROWN Pt BL

City TACOMA	State WA	Zip Code 98422
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **420.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.98198**

Amount of Each Receipt this Period  

40.00
-------

**10.00**

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

Mailing Address 1101 BROWN Pt BL

City TACOMA	State WA	Zip Code 98422
----------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **430.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.98208**

Amount of Each Receipt this Period  

40.00
-------

**10.00**

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

Mailing Address 7805 - 99th Av SW

City LAKEWOOD	State WA	Zip Code 98498
------------------	-------------	-------------------

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

Name of Employer Pacific Maritime Association	Occupation Longshore Worker
--	--------------------------------

Receipt For:  
 Primary     General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **880.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.97950**

Amount of Each Receipt this Period  

40.00
-------

**20.00**

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	<b>40.00</b>
<b>TOTAL</b> 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 94 OF 102
	<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)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM A WATKINS</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97951</b>
Mailing Address 7805 - 99th Av SW			Amount of Each Receipt this Period 20.00
City LAKEWOOD	State WA	Zip Code 98498	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 900.00		

Full Name (Last, First, Middle Initial) <b>B. WILLIAM A WATKINS</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 17 / 2015 <b>Transaction ID : SA11AI.97952</b>
Mailing Address 7805 - 99th Av SW			Amount of Each Receipt this Period 20.00
City LAKEWOOD	State WA	Zip Code 98498	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 920.00		

Full Name (Last, First, Middle Initial) <b>C. WILLIAM A WATKINS</b>			Date of Receipt M M / D D / Y Y Y Y Y Y 11 / 23 / 2015 <b>Transaction ID : SA11AI.97953</b>
Mailing Address 7805 - 99th Av SW			Amount of Each Receipt this Period 20.00
City LAKEWOOD	State WA	Zip Code 98498	
FEC ID number of contributing federal political committee. C			
Name of Employer Pacific Maritime Association	Occupation Longshore Worker		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 940.00		

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	60.00
<b>TOTAL</b> 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 95 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial) <b>A. WILLIAM A WATKINS</b>			Date of Receipt		
Mailing Address 7805 - 99th Av SW			M M M / D D D / Y Y Y Y Y Y 11 / 23 / 2015		
City State Zip Code LAKEWOOD WA 98498			<b>Transaction ID : SA11AI.97954</b>		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 40.00		
Name of Employer Pacific Maritime Association		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 960.00			

Full Name (Last, First, Middle Initial) <b>B. SCOTT A WELFRINGER</b>			Date of Receipt		
Mailing Address 1920 - 414th St E			M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2015		
City State Zip Code EATONVILLE CA 98328			<b>Transaction ID : SA11AI.97876</b>		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 10.00		
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 430.00			

Full Name (Last, First, Middle Initial) <b>C. SCOTT A WELFRINGER</b>			Date of Receipt		
Mailing Address 1920 - 414th St E			M M M / D D D / Y Y Y Y Y Y 11 / 17 / 2015		
City State Zip Code EATONVILLE CA 98328			<b>Transaction ID : SA11AI.97877</b>		
FEC ID number of contributing federal political committee. <b>C</b>			Amount of Each Receipt this Period 10.00		
Name of Employer PMA		Occupation Longshore Worker			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 440.00			

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	40.00
<b>TOTAL</b> 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 96 OF 102
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. SCOTT A WELFRINGER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1920 - 414th St E

City EATONVILLE	State CA	Zip Code 98328
--------------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
450.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	17	/	2015

**Transaction ID : SA11AI.97878**

Amount of Each Receipt this Period  
10.00

**B. SCOTT A WELFRINGER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1920 - 414th St E

City EATONVILLE	State CA	Zip Code 98328
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FEC ID number of contributing federal political committee. **C**

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
460.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.97879**

Amount of Each Receipt this Period  
10.00

**C. SCOTT A WELFRINGER**  
Full Name (Last, First, Middle Initial)  
Mailing Address 1920 - 414th St E

City EATONVILLE	State CA	Zip Code 98328
--------------------	-------------	-------------------

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

Name of Employer PMA	Occupation Longshore Worker
-------------------------	--------------------------------

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
470.00

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
11	/	23	/	2015

**Transaction ID : SA11AI.97880**

Amount of Each Receipt this Period  
10.00

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	30.00
<b>TOTAL</b> 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 97 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Michael S Yamaguchi**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 98-1399 A NOLA St # A  
 City PEARL CITY State HI Zip Code 96782  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Division Dir  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 220.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.98037**  
 Amount of Each Receipt this Period  
 200.00

**B. Mathew Yamamoto**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 451 Atkinson Drive  
 City HONOLULU State HI Zip Code 96814-4729  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer ILWU 142 Occupation Int'l Rep  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 360.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97917**  
 Amount of Each Receipt this Period  
 40.00

**C. GERARDO L YANEZ**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address 1148 N ISLAND AVE  
 City WILMINGTON State CA Zip Code 90744  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer PMA Occupation Longshore  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 03 / 2015  
**Transaction ID : SA11AI.98260**  
 Amount of Each Receipt this Period  
 10.00

**SUBTOTAL** of Receipts This Page (optional)..... ▶ 70.00  
**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 98 OF 102
	<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	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

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

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **310.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 10 / 2015

**Transaction ID : SA11AI.98261**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **320.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 17 / 2015

**Transaction ID : SA11AI.98262**

Amount of Each Receipt this Period  
**10.00**

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

Mailing Address 1148 N ISLAND AVE

City WILMINGTON State CA Zip Code 90744

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

Name of Employer PMA Occupation Longshore

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **330.00**

Date of Receipt  
 M M M / D D D / Y Y Y Y Y Y  
 11 / 27 / 2015

**Transaction ID : SA11AI.98263**

Amount of Each Receipt this Period  
**10.00**

**SUBTOTAL** of Receipts This Page (optional)..... ▶ **30.00**

**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 99 OF 102  
(check only one)  
 11a     11b     11c     12  
 13     14     15     16     17

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NAME OF COMMITTEE (In Full)  
**International Longshore and Warehouse Union -- Political Action Fund**

**A. Gordon Y.S Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Box 1454  
 City State Zip Code  
 AIEA HI 96701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pacific Maritime Association Longshore Worker  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 525.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97850**  
 Amount of Each Receipt this Period  
 25.00

**B. Gordon Y.S Young**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address Box 1454  
 City State Zip Code  
 AIEA HI 96701  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Pacific Maritime Association Longshore Worker  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼  
 550.00

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 11 / 17 / 2015  
**Transaction ID : SA11AI.97851**  
 Amount of Each Receipt this Period  
 25.00

**C.**  
 Full Name (Last, First, Middle Initial)  
 Mailing Address  
 City State Zip Code  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 Receipt For:  
 Primary     General  
 Other (specify) ▼  
 Aggregate Year-to-Date ▼

Date of Receipt  
 M M / D D / Y Y Y Y Y  
 Amount of Each Receipt this Period

<b>SUBTOTAL</b> of Receipts This Page (optional).....▶	50.00
<b>TOTAL</b> This Period (last page this line number only).....▶	5547.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

**A. BARBARA LEE FOR CONGRESS**

Mailing Address 1736 FRANKLIN STREET #500

City OAKLAND State CA Zip Code 94612

Purpose of Disbursement  
Check uncashed/lost

011

Candidate Name

**BARBARA LEE**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2014  
 Primary  General  
 Other (specify) ▼

State: CA District: 09

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

**Transaction ID : SB23.98292**

Amount of Each Disbursement this Period

-1000.00
----------

Full Name (Last, First, Middle Initial)

**B. CATHERINE CORTEZ MASTO FOR SENATE**

Mailing Address 8020 SOUTH RAINBOW BLVD #100-112

City LAS VEGAS State NV Zip Code 89139

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**CATHERINE CORTEZ MASTO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: NV District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			16			2015			

**Transaction ID : SB23.98273**

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. DR. RAUL RUIZ FOR CONGRESS 2012 COMMITTEE**

Mailing Address 73373 COUNTRY CLUB DRIVE #1904

City PALM DESERT State CA Zip Code 92260

Purpose of Disbursement  
Check uncashed/lost

011

Candidate Name

**RAUL DR RUIZ**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 36

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

**Transaction ID : SB23.98291**

Amount of Each Disbursement this Period

-1000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

0.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

**A. FEINGOLD VICTORY FUND**

Mailing Address 120 MARYLAND AVE NE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**RUSSELL D FEINGOLD**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: WI District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

Transaction ID : SB23.98281

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF MAZIE HIRONO**

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**MAZIE K HIRONO**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: HI District: 02

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			30			2015			

Transaction ID : SB23.98290

Amount of Each Disbursement this Period

2000.00
---------

Full Name (Last, First, Middle Initial)

**C. TAMMY FOR ILLINOIS**

Mailing Address PO BOX 10793

City CHICAGO State IL Zip Code 60610

Purpose of Disbursement  
Contribution in support of candidate

011

Candidate Name

**L TAMMY DUCKWORTH**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: IL District: 00

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
11			17			2015			

Transaction ID : SB23.98289

Amount of Each Disbursement this Period

2000.00
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**SUBTOTAL** of Disbursements This Page (optional)..... ▶

6000.00
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**TOTAL** This Period (last page this line number only)..... ▶

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**International Longshore and Warehouse Union -- Political Action Fund**

Full Name (Last, First, Middle Initial)

**A. TED STRICKLAND FOR CONGRESS**

Mailing Address PO BOX 580 1337 THOMAS HOLLOW ROAD

City LUCASVILLE State OH Zip Code 45648

Purpose of Disbursement  
Contribution in support of candidate

011

Category/  
Type

Candidate Name

**TED STRICKLAND**

Office Sought:  House  
 Senate  
 President

Disbursement For: 2016  
 Primary  General  
 Other (specify) ▼

State: OH District: 06

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
11 / 17 / 2015

**Transaction ID : SB23.98264**

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2000.00

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

8000.00