

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

FEDERAL ELECTION COMMISSION OPERATIONS CENTER

2005 JAN 11 A 9 32 Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 127E4M5

ADDRESS (number and street) 000114314 091004 R 202 RON LAWRENCE NATIONAL ASSOCIATION OF LETTER CARRIERS OF UNITED STATES OF AMERICA 11381 ILEX ST NW COON RAPIDS MN 55446

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE 3. IS THIS REPORT NEW OR AMENDED

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

5. Covering Period 11/23/2004 through 12/31/2004

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 Ron Lawrence Signature of Treasurer Ron Lawrence Date 01/05/2005

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PAL 9 NALC

Report Covering the Period:

From:

11 23 2004

To:

12 31 2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2004		952927
(b) Cash on Hand at Beginning of Reporting Period.....	894674	
(c) Total Receipts (from Line 19).....	- 0 -	1020163
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	894674	1973090
7. Total Disbursements (from Line 31).....	- 0 -	1078416
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	894674	894674
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	- 0 -	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	- 0 -	



This committee has qualified as a multi-candidate committee. (see FEC FORM 1M)

For further information contact:

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

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

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2008)

Page 3

Write or Type Committee Name

PAL9NALC

Report Covering the Period:

From:

11 23 2004

To:

12 31 2004

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

-0-

1020163

- (b) Political Party Committees.....
- (c) Other Political Committees (such as PACs).....
- (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 30, page 5)..... ▶

-0-

1020163

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

13. All Loans Received.....

14. Loan Repayments Received.....

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

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

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

18. Transfers from Non-Federal and Levin Funds

- (a) Non-Federal Account (from Schedule H3).....
- (b) Levin Funds (from Schedule H5).....
- (c) Total Transfers (add 18(a) and 18(b)).....

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

-0-

1020163

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

-0-

1020163

DETAILED SUMMARY PAGE
of Disbursements

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Page 4

I. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (e) Allocated Federal/Non-Federal Activity (from Schedule H4) (f) Federal Share		
(i) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(f), (a)(i), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		9,000.00
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		0.00
29. Other Disbursements		67,841.60
30. Federal Election Activity (2 U.S.C. §481(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		107,841.60
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))		107,841.60
32. Total Federal Disbursements (subtract Line 21(a)(b) and Line 30(a)(ii) from Line 31)		107,841.60

DETAILED SUMMARY PAGE
of Disbursements

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Page 5

B. 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)		
34. Total Contribution Refunds (from Line 29(c))		
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)		
36. Total Federal Operating Expenditures (add Line 21(a)(1) and Line 21(b))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

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

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

FOR LINE NUMBER: (check only one)		PAGE / OF	
<input 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) **PAL QNALC**

A.

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 _____

Amount of Each Receipt this Period _____

B.

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 _____

Amount of Each Receipt this Period _____

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 _____

Amount of Each Receipt this Period _____

SUBTOTAL of Receipts This Page (optional) _____

TOTAL This Period (add page this line number only) _____

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> USPS Express Mail	Postmarked
<input checked="" type="checkbox"/> Postmark Illegible	Delivery Confirmation™ Label <input type="checkbox"/>
<input type="checkbox"/> No Postmark	Shipping Date
<input type="checkbox"/> Overnight Delivery Service (Specify):	Date of Receipt
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt or Postmarked
<input type="checkbox"/> Other (Specify):	
<i>Jmjo</i> PREPARER (5/2004)	1/11/05 DATE PREPARED