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FEC  
FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** **Example:** If typing, type over the lines. **12FEAMS**

COO114314 030602 N 271

RDH LAWRENCE  
NATIONAL ASSOCIATION OF LETTER  
CARRIERS OF UNITED STATES OF  
11581 ILEX ST NW  
COON RAPIDS MN 55448

ADDRESS (number and street)

Check if different than previously reported. (ADC)

2. FEC IDENTIFICATION NUMBER **C00114314**

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) (Election Year Only)

Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)

(c) 12-Day PRE-Election Report for that:

Primary (12P)  General (12G)  Runoff (12R)

Convention (12C)  Special (12S)

Election on: [ ] / [ ] / [ ] in the State of [ ]

(d) 30-Day POST-Election Report for that:

General (30G)  Runoff (30R)  Special (30S)

Election on: [ ] / [ ] / [ ] in the State of [ ]

5. Covering Period **01 01 2002** through **03 31 2002**

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 TREASURER

Signature of Treasurer Ron Lawrence Date **04 01 2002**

NOTE: Submission of false, erroneous, or incomplete information may subject the persons signing this Report to the penalties of 2 U.S.C. 5432g.

Office Use Only

FEC FORM 3X (Revised 1/01)

22-03-752-2947

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

**PAL 9 NALO**

Report Covering the Period:

From:

**01 01 2002**

To:

**03 31 2002**

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <b>2002</b>		<b>705895</b>
(b) Cash on Hand at Beginning of Reporting Period	<b>705895</b>	
(c) Total Receipts (from Line 10)	<b>838534</b>	<b>838534</b>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	<b>1544429</b>	<b>1544429</b>
7. Total Disbursements (from Line 8c)	<b>279950</b>	<b>279950</b>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	<b>1264479</b>	<b>1264479</b>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)		
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)		

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

22-03-752-2948

**DETAILED SUMMARY PAGE**  
of Receipts

REC Form 304 (Revised 1/01)

Page 9

Write or Type Committee Name

PAL 9 NALC

Report Covering the Period

From:

01 ' 01 ' 2002

To:

03 ' 31 ' 2002

**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 (see Schedule A) .....

(ii) Unitemized .....

8385.34

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

8385.34

8385.34

(b) Political Party Committees .....

(c) Other Political Committees (such as PACs) .....

(d) Total Contributions (add Lines 11(a)(i), (b), and (c) (Carry Totals to Line 32, page 4) .....

8385.34

8385.34

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 36, page 4) .....

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

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

18. Transfers from Nonfederal Account for Joint Activity .....

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

8385.34

8385.34

20. Total Federal Receipts (subtract Line 16 from Line 19) .....

8385.34

8385.34

22-03-752-2949

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 28X (Revised 1/01)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share		
(ii) Non-Federal Share	4950	4950
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) ▶	4950	4950
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	100000	100000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (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)) ▶		
29. Other Disbursements	175000	175000
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29) ▶	279950	279950
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30) ▶	275000	275000
<b>III. Net Contributions/Operating Expenditures</b>		
32. Total Contributions (other than loans) (from Line 11(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ▶		
36. Offsets to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35) ▶		

2025 RELEASE UNDER E.O. 14176

**SCHEDULE B (FEC FORM 31)**  
**ITEMIZED DISBURSEMENTS**

Use **2007 520004** for each category of the Detailed Summary Page

PUT LINE NUMBER (check only one)

<input type="checkbox"/> 21a	<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

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) **PAL9 NALC**

**A.** Full Name (Last, First, Middle Initial) **SABO Vol. Committee**

Mailing Address **P.O. Box 14791**

City **Mpls** State **MN** Zip Code **55414**

Purpose of Disbursement

Candidate Name **MARTIN SABO** Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement **01 / 30 / 2007**

Amount of Each Disbursement this Period **1,000.00**

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

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

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) **1,000.00**

TOTAL This Period (last page file the number only) **1,000.00**

2007-03-25 11:22

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (in Full)

PAL9 NALC

Full Name (Last, First, Middle Initial)

**A** MN STATE DFL

Date of Disbursement

02 / 27 / 2002

Mailing Address

352 WACONTA ST

Amount of Each Disbursement this Period

1,250.00

City

ST. PAUL

State

MN

Zip Code

55101

Purpose of Disbursement

HUMPHREY DINNER

Category Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B** DAN ERHART VOL. COMMITTEE

Date of Disbursement

03 / 25 / 2002

Mailing Address

4120-115TH AVENUE NW

Amount of Each Disbursement this Period

500.00

City

COON RAPIDS

State

MN

Zip Code

55433

Purpose of Disbursement

COUNTY COMMISSIONER

Category Type

Candidate Name

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C**  
Mailing Address

Date of Disbursement

03 / 27 / 2002

City

State

Zip Code

Amount of Each Disbursement this Period

Purpose of Disbursement

Candidate Name

Category Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

CUSTOMER TOTAL of Disbursements This Page (optional)

1,750.00

TOTAL This Period (last page this line number only)

1,750.00

2002-03-27 10:23

**ENVELOPE REPLACEMENT PAGE  
FOR INCOMING DOCUMENTS**

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

22.03.752.2953

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> First Class Mail	POSTMARKED 4-1-02
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/> Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/> Other ( Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/> Electronic Filing	
<i>SMW</i> PREPARER	4-11-02 DATE PREPARED