

RECEIVED  
FEDERAL  
OPERATIONS CENTER  
2003 JUL 14 P 4 35  
Office Use Only

# FEC FORM 3X

## REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

1. NAME OF COMMITTEE (in full)

USE FEC MAILING LABEL OR TYPE OR PRINT

Exempt? (Type, type over the line)

12PB4365

ADDRESS (street and city)

RON LAWRENCE  
NATIONAL ASSOCIATION OF LETTER  
CARRIERS OF UNITED STATES OF  
AMERICA  
15501 LEX ST SW  
CORN WASH WA 98001

Check if different from previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

00014314

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

In the State of

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

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

Election on

In the State of

5. Covering Period

01 01 2003 through 06 30 2003

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  
Treasurer

Date

07 05 2003

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. 5497g.

Office Use Only

FEC FORM 3X  
(Revised 1/01)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/04)

Page 2

Write or Type Committee Name

PAL 9 NALC

Report Covering the Period:

From:

01 01 2003

To:

04 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1. <span style="float: right;">2003</span>		4491.74
(b) Cash on Hand at Beginning of Reporting Period	4491.74	
(c) Total Receipts (from Line 19)	8769.03	8769.03
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	13260.77	13260.77
7. Total Disbursements (from Line 30)	2203.50	2203.50
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	11057.27	11057.27
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	00	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedules C and/or Schedule D)	00	

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

For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20462

Toll Free 800-424-9530  
Local 202-894-1100

DETAILED SUMMARY PAGE  
of Receipts

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

PAL 9 NALC

Receipts Covering the Period:

From:

01 01 2003

To:

06 30 2003

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
- (b) Itemized (Use Schedule A) .....

- (c) Unitemized .....
- (d) TOTAL (add Lines 11(a)(i) and (b)) .....

- (e) Political Party Committees .....
- (f) Other Political Committees (such as PACs) .....
- (g) Total Contributions (add Lines 11(a)(i), (b), and (e)) (Carry Totals to Line 32, page 4) .....

8769.03  
8769.03

8769.03

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 32, 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) .....

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

8769.03

8769.03

8769.03

8769.03

8769.03

8769.03

DETAILED SUMMARY PAGE  
of Disbursements

FEC Form 3X (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	5350	5350
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	5350	5350
22. Transfers to Affiliated/Other Party		
Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees	5000	5000
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(b)) (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))	165000	165000
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)	220350	220350
31. Total Federal Disbursements (subtract Line 21(a)(i) from Line 30)	215000	215000
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)	876903	876903
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. Offset to Operating Expenditures (from Line 15, page 3)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 1 OF 1

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

Any information reported 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)

DAL 9 NALC

Full Name (Last, First, Middle Initial)

A. SABO for CONGRESS

Mailing Address

11702 Selkirk Ave

City

Buensville

State

MN

Zip Code

55337

Purpose of Disbursement

Candidate Name

MARTIN OLAV SABO

Category/  
Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State:

District:

Date of Disbursement

02 / 12 / 2003

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

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

Category/  
Type

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)

TOTAL This Period (last page has line number only)

500.00

500.00

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE 1 OF 1	
<input type="checkbox"/> 21a	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input checked="" type="checkbox"/> 29
<input type="checkbox"/> 26	<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	

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NAME OF COMMITTEE (in Full) **PAL 9 NALC**

**A. Neighbors Who WANT Moore**

Full Name (Last, First, Middle Initial): **Neighbors Who WANT Moore**

Date of Disbursement: **01 09 2003**

Mailing Address: **314 - 13TH AVE NE**

City: **Mpls** State: **MN** Zip Code: **55413**

Purpose of Disbursement: **CITY COUNCIL**

Candidate Name: **OLIN MOORE**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

Amount of Each Disbursement this Period: **30000**

**B. MN STATE DFL**

Full Name (Last, First, Middle Initial): **MN STATE DFL**

Date of Disbursement: **03 29 2003**

Mailing Address: **255 EAST PLATO BLVD**

City: **ST. PAUL** State: **MN** Zip Code: **55101**

Purpose of Disbursement: **HUMPHREY DINNER**

Candidate Name:

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

Amount of Each Disbursement this Period: **25000**

**C. ERHART VOL. Committee**

Full Name (Last, First, Middle Initial): **ERHART VOL. Committee**

Date of Disbursement: **04 23 2003**

Mailing Address: **4120 - 115TH AVE NW**

City: **COON RAPIDS** State: **MN** Zip Code: **55733**

Purpose of Disbursement: **COUNTY COMMISSIONER**

Candidate Name: **DAN ERHART**

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) **▼**

Amount of Each Disbursement this Period: **10000**

**GRAND TOTAL of Disbursements This Page (optional):** **165000**

**TOTAL This Period (last page this line number only):** **165000**

Federal Election Commission

## ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has 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"/> First Class Mail	POSTMARKED
<input type="checkbox"/> Registered/Certified Mail	POSTMARKED (R/C)
<input checked="" 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>SM</i> PREPARER	7-14-03 DATE PREPARED