

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 United Association Political Education Committee

ADDRESS (number and street) 901 Massachusetts Avenue, NW Washington DC 20001 4307 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00012476 3. IS THIS REPORT NEW (N) OR AMENDED (A) X

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special (d) 30-Day Post-Election Report for the: General, Runoff, Special Election on 11 04 2008 in the State of

5. Covering Period 10 01 2008 through 10 15 2008

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 Assistant Treasurer Patrick R. Perno

Signature of Treasurer Electronically Filed by Assistant Treasurer Patrick R. Perno Date 03 05 2009

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

Office Use Only FE6AN026 FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

United Association Political Education Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		1410554.13
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	1561166.35									
(c) Total Receipts (from Line 19)	62240.00	1606004.84								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	1623406.35	3016558.97								
7. Total Disbursements (from Line 31)	479719.70	1872872.32								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1143686.65	1143686.65								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
United Association Political Education Committee

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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	1460.00	6060.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	25280.00	1314484.13
(iii) TOTAL (add Lines 11(a)(i) and (ii)	26740.00	1320544.13
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	35500.00	264100.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	62240.00	1584644.13
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	15000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	6360.71
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	62240.00	1606004.84
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	62240.00	1606004.84

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	3110.92	13888.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	3110.92	13888.72
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	153000.00	1138100.00
24. Independent Expenditure (use Schedule E)	57508.25	140533.07
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	266100.53	580350.53
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	479719.70	1872872.32
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	479719.70	1872872.32

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	62240.00	1584644.13
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62240.00	1584644.13
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	3110.92	13888.72
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	3110.92	13888.72

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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)
United Association Political Education Committee

A.

Full Name (Last, First, Middle Initial)
Matt Fair

Mailing Address 116 Detonti Drive

City State Zip Code
Maumelle AR 72113

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2008

Transaction ID: SA11AI.11430

Amount of Each Receipt this Period 200.00

Donation

B.

Full Name (Last, First, Middle Initial)
Gary Greavitt

Mailing Address PO Box 92

City State Zip Code
Cassopolis MI 49031

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2008

Transaction ID: SA11AI.11428

Amount of Each Receipt this Period 200.00

Donation

C.

Full Name (Last, First, Middle Initial)
Nathan Muckelrath

Mailing Address 152 Union Road

City State Zip Code
El Dorado AR 71730

FEC ID number of contributing federal political committee. C

Name of Employer N/A Occupation Pipefitter

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 420.00

Date of Receipt M M / D D / Y Y Y Y
10 / 10 / 2008

Transaction ID: SA11AI.11425

Amount of Each Receipt this Period 420.00

Donation

SUBTOTAL of Receipts This Page (optional) 820.00

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 7 / 22

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.

Full Name (Last, First, Middle Initial)
William J. Rodgers

Mailing Address 2333 Inglewood Court

City State Zip Code
South Bend IN 46616

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

Name of Employer Occupation
Plumbers & Pipefitters Local 172 JATC Training

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 200.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.11429

Amount of Each Receipt this Period

200.00

Donation

B.

Full Name (Last, First, Middle Initial)
Richard A Ruhnow

Mailing Address PO Box 91

City State Zip Code
Monterey IN 46960

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

Name of Employer Occupation
N/A N/A

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 240.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.11427

Amount of Each Receipt this Period

240.00

Donation

C.

Full Name (Last, First, Middle Initial)
James R. Scheetz

Mailing Address 22405 New Road

City State Zip Code
South Bend IN 46614

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

Name of Employer Occupation
N/A N/A

Receipt For: Aggregate Year-to-Date
 Primary General
 Other (specify) ▼ 400.00

Date of Receipt

M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Transaction ID: SA11AI.11431

Amount of Each Receipt this Period

200.00

Donation

SUBTOTAL of Receipts This Page (optional)

640.00

TOTAL This Period (last page this line number only)

1460.00

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

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

FOR LINE NUMBER: PAGE 8 / 22
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial)
Plumbers Local 1 PAC

Mailing Address 158-29 Cross Bay Boulevard

City State Zip Code
Howard Beach NY 11414

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
50500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	8

Transaction ID: SA11C.11432

Amount of Each Receipt this Period
25500.00

Donation

B. Full Name (Last, First, Middle Initial)
SPRINKLER FITTERS LOCAL #704 POLITICAL ACTION COMMITTEE

Mailing Address 32500 W EIGHT MILE ROAD

City State Zip Code
FARMINGTON MI 48336

FEC ID number of contributing federal political committee. **C** C00389551

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	0	/	2	0	0	8

Transaction ID: SA11C.11433

Amount of Each Receipt this Period
10000.00

Donation

SUBTOTAL of Receipts This Page (optional)	▶	35500.00
TOTAL This Period (last page this line number only)	▶	35500.00

**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)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) Complete Campaigns, Inc.	Transaction ID: SB21B.11472 Date of Disbursement 10 / 09 / 2008
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 75.00
	City San Diego State CA Zip Code 92102	
	Purpose of Disbursement Subscription Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Complete Campaigns, Inc.	Transaction ID: SB21B.11494 Date of Disbursement 10 / 15 / 2008
	Mailing Address 610 Gateway Center Way Suite K	Amount of Each Disbursement this Period 150.00
	City San Diego State CA Zip Code 92102	
	Purpose of Disbursement Subscription Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Congressional Quarterly	Transaction ID: SB21B.11438 Date of Disbursement 10 / 01 / 2008
	Mailing Address 1414 22nd Street, NW	Amount of Each Disbursement this Period 2885.92
	City Washingt State DC Zip Code 20037	
	Purpose of Disbursement Subscription Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	3110.92
TOTAL This Period (last page this line number only)	3110.92

**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 10 / 22

<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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) JUDITH W BAKER	Transaction ID: SB23.11483 Date of Disbursement 10 / 10 / 2008
	Mailing Address 3075 S RANGELINE RD	Amount of Each Disbursement this Period 5000.00
	City COLUMBIA State MO Zip Code 65201	
	Purpose of Disbursement Transfer	
	Candidate Name JUDITH W BAKER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 09	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) KAY BARNES	Transaction ID: SB23.11481 Date of Disbursement 10 / 10 / 2008
	Mailing Address PO BOX 14194	Amount of Each Disbursement this Period 5000.00
	City PARKVILLE State MO Zip Code 64152	
	Purpose of Disbursement Transfer	
	Candidate Name KAY BARNES	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 06	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) XAVIER BECERRA	Transaction ID: SB23.11478 Date of Disbursement 10 / 10 / 2008
	Mailing Address 1910 SUNSET BLVD #560	Amount of Each Disbursement this Period 2500.00
	City LOS ANGELES State CA Zip Code 90026	
	Purpose of Disbursement Transfer	
	Candidate Name XAVIER BECERRA	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	12500.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) SANFORD D JR. BISHOP	Transaction ID: SB23.11486
	Mailing Address 1909 Devon Drive	Date of Disbursement 10 / 15 / 2008
	City Albany State GA Zip Code 31707	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name SANFORD D JR. BISHOP	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: GA District: 02	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) CHRISTOPHER CARNEY	Transaction ID: SB23.11460
	Mailing Address PO Box 38	Date of Disbursement 10 / 02 / 2008
	City Dimock State PA Zip Code 18816	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name CHRISTOPHER CARNEY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: PA District: 10	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) KATHY CASTOR	Transaction ID: SB23.11463
	Mailing Address PO Box 5419	Date of Disbursement 10 / 02 / 2008
	City Tampa State FL Zip Code 33675	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name KATHY CASTOR	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008
	State: FL District: 11	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	▶	11000.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) DONALD J CAZAYOUX</p> <p>Mailing Address 803 E MAIN ST</p> <p>City NEW ROADS State LA Zip Code 70760</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name DONALD J CAZAYOUX</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 06</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11465 Date of Disbursement 10 / 03 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) EDWIN CHAU</p> <p>Mailing Address 506 N GARFIELD AVENUE SUITE 260</p> <p>City ALHAMBRA State CA Zip Code 91801</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name EDWIN CHAU</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 42</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11480 Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) COSTA, JIM</p> <p>Mailing Address 2037 W BULLARD #509</p> <p>City FRESNO State CA Zip Code 93711</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name COSTA, JIM</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 20</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11466 Date of Disbursement 10 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

PAGE 13 / 22

<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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) TIMOTHY M CUNHA	Transaction ID: SB23.11446 Date of Disbursement 10 / 01 / 2008
	Mailing Address 2433 SE 20TH CIRCLE PO BOX 6546	Amount of Each Disbursement this Period 5000.00
	City OCALA State FL Zip Code 34478	
	Purpose of Disbursement Transfer	
	Candidate Name TIMOTHY M CUNHA	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 06	

B.	Full Name (Last, First, Middle Initial) KATHLEEN ANN DAHLKEMPER	Transaction ID: SB23.11442 Date of Disbursement 10 / 01 / 2008
	Mailing Address 530 SEMINOLE DRIVE	Amount of Each Disbursement this Period 5000.00
	City ERIE State PA Zip Code 16505	
	Purpose of Disbursement Transfer	
	Candidate Name KATHLEEN ANN DAHLKEMPER	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: PA District: 03	

C.	Full Name (Last, First, Middle Initial) LINCOLN EDWARD DAVIS	Transaction ID: SB23.11439 Date of Disbursement 10 / 01 / 2008
	Mailing Address PO BOX 350	Amount of Each Disbursement this Period 5000.00
	City JAMESTOWN State TN Zip Code 38556	
	Purpose of Disbursement Transfer	
	Candidate Name LINCOLN EDWARD DAVIS	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: TN District: 04	

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) JILL T DERBY</p> <p>Mailing Address 1298 KINGSBURY GRADE</p> <p>City GARDNERVILLE State NV Zip Code 89460</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JILL T DERBY</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NV District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11455</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>B. Full Name (Last, First, Middle Initial) Mike Doyle for Congress</p> <p>Mailing Address P.O. Box 17426</p> <p>City Pittsburgh State PA Zip Code 15235</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Mike Doyle for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 18</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11441</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) REBECCA GREENWALD</p> <p>Mailing Address 14265 F AUO</p> <p>City PERRY State IA Zip Code 50220</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name REBECCA GREENWALD</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 04</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11489</p> <p>Date of Disbursement 10 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

12500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) KAY R HAGAN	Transaction ID: SB23.11469 Date of Disbursement
	Mailing Address 305 MEADOWBROOK TERRACE	<input type="text" value="10"/> <input type="text" value="08"/> / <input type="text" value="2008"/>
	City GREENSBORO State NC Zip Code 27408	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="5000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEBORAH 'DEBBIE' HALVORSON	Transaction ID: SB23.11467 Date of Disbursement
	Mailing Address 565 ABERDEEN DRIVE	<input type="text" value="10"/> <input type="text" value="07"/> / <input type="text" value="2008"/>
	City CRETE State IL Zip Code 60417	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="3000.00"/>
	Candidate Name DEBORAH 'DEBBIE' HALVORSON	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) WILLIAM MICHAEL JONES	Transaction ID: SB23.11487 Date of Disbursement
	Mailing Address 4731 EAST FOREST PEAK	<input type="text" value="10"/> <input type="text" value="15"/> / <input type="text" value="2008"/>
	City MARIETTA State GA Zip Code 30066	Amount of Each Disbursement this Period
	Purpose of Disbursement Transfer	<input type="text" value="5000.00"/>
	Candidate Name WILLIAM MICHAEL JONES	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 06	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="13000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) LARRY KISSELL	Transaction ID: SB23.11493
	Mailing Address PO BOX 1530	Date of Disbursement 10 / 15 / 2008
	City BISCOE State NC Zip Code 27209	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name LARRY KISSELL	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: NC District: 08	

B.	Full Name (Last, First, Middle Initial) SUZANNE KOSMAS	Transaction ID: SB23.11450
	Mailing Address 257 Minorca Beach Way	Date of Disbursement 10 / 01 / 2008
	City New Smyrna Beach State FL Zip Code 32169	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name SUZANNE KOSMAS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: FL District: 24	

C.	Full Name (Last, First, Middle Initial) JOHN MR. LEWIS	Transaction ID: SB23.11485
	Mailing Address 2015 Wallace Rd.	Date of Disbursement 10 / 15 / 2008
	City Atlanta State GA Zip Code 30331	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer	Category/ Type
	Candidate Name JOHN MR. LEWIS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: GA District: 05	

SUBTOTAL of Disbursements This Page (optional)	▶	15000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial) David LOEBSACK FOR CONGRESS <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Transfer Candidate Name David LOEBSACK FOR CONGRESS Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11474 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) ELIZABETH HELEN MARKEY <hr/> Mailing Address 430 W MOUNTAIN AVE <hr/> City State Zip Code FORT COLLINS CO 80521 Purpose of Disbursement Transfer Candidate Name ELIZABETH HELEN MARKEY Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11448 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) JAMES JOSEPH (JAY) MCGOVERN <hr/> Mailing Address 3634 RIVERSIDE AVENUE <hr/> City State Zip Code JACKSONVILLE FL 32205 Purpose of Disbursement Transfer Candidate Name JAMES JOSEPH (JAY) MCGOVERN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 04 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11444 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 1 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	15000.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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<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)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) MISSOURI DEMOCRATIC STATE COMMITTEE</p> <p>Mailing Address P.O.Box 719</p> <p>City Jefferson City State MO Zip Code 65102</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name MISSOURI DEMOCRATIC STATE COMMITTEE</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB23.11495 Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 10000.00</p>
<p>B. Full Name (Last, First, Middle Initial) WILLIAM D MITCHELL</p> <p>Mailing Address 101 E KENNEDY BOULEVARD SUITE 3010</p> <p>City TAMPA State FL Zip Code 33602</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name WILLIAM D MITCHELL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: FL District: 09</p>	<p>Transaction ID: SB23.11461 Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>C. Full Name (Last, First, Middle Initial) GEORGIANNA W OLIVER</p> <p>Mailing Address 1244 E 26TH ST</p> <p>City TULSA State OK Zip Code 74114</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name GEORGIANNA W OLIVER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OK District: 01</p>	<p>Transaction ID: SB23.11456 Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

17500.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

<p>A. Full Name (Last, First, Middle Initial) ANDREW MONROE RICE</p> <p>Mailing Address 813 NW 41ST STREET</p> <p>City OKLAHAMA CITY State OK Zip Code 73118</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name ANDREW MONROE RICE</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: OK District: 00</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11458</p> <p>Date of Disbursement 10 / 02 / 2008</p> <p>Amount of Each Disbursement this Period 5000.00</p>
<p>B. Full Name (Last, First, Middle Initial) JOHN T SALAZAR</p> <p>Mailing Address PO Box 534</p> <p>City Pueblo State CO Zip Code 81002</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name JOHN T SALAZAR</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 03</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11440</p> <p>Date of Disbursement 10 / 01 / 2008</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Adam Schiff for Congress</p> <p>Mailing Address 425 Amherst Drive</p> <p>City Burbank State CA Zip Code 91504</p> <p>Purpose of Disbursement Transfer (correct amount)</p> <p>Candidate Name Adam Schiff for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.11479</p> <p>Date of Disbursement 10 / 10 / 2008</p> <p>Amount of Each Disbursement this Period 2500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

11500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
United Association Political Education Committee

A.	Full Name (Last, First, Middle Initial) CAROL SHEA-PORTER Mailing Address P.O. Box 453 City Rochester State NH Zip Code 03866 Purpose of Disbursement Transfer Candidate Name CAROL SHEA-PORTER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NH District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11475 Date of Disbursement 10 / 10 / 2008	Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) PAUL DAVID TONKO Mailing Address 137 PRINCETON STREET City AMSTERDAM State NY Zip Code 12010 Purpose of Disbursement Transfer Candidate Name PAUL DAVID TONKO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11476 Date of Disbursement 10 / 10 / 2008	Amount of Each Disbursement this Period 5000.00
C.	Full Name (Last, First, Middle Initial) ROBERT WEXLER Mailing Address Post Office Box 810669 Suite 288 City Boca Raton State FL Zip Code 33431 Purpose of Disbursement Transfer Candidate Name ROBERT WEXLER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 19 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.11464 Date of Disbursement 10 / 02 / 2008	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional)	15000.00
TOTAL This Period (last page this line number only)	153000.00

**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)

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

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NAME OF COMMITTEE (In Full)
United Association Political Education Committee

A. Full Name (Last, First, Middle Initial) Citizens for a Brighter Tomorrow Inc. <hr/> Mailing Address 906 S Rome Avenue <hr/> City Tampa State FL Zip Code 33606 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.11470 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 0 8
	Amount of Each Disbursement this Period 200000.00
B. Full Name (Last, First, Middle Initial) Westin Diplomat <hr/> Mailing Address 3555 S Ocean Drive <hr/> City Hollywood State FL Zip Code 33019 <hr/> Purpose of Disbursement UA Political Conference Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.11491 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 5 / 2 0 0 8
	Amount of Each Disbursement this Period 66100.53

SUBTOTAL of Disbursements This Page (optional)	266100.53
TOTAL This Period (last page this line number only)	266100.53

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) United Association Political Education Committee		FEC IDENTIFICATION NUMBER C C00012476
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
Clear Images

Mailing Address
121 11th Street

City Toledo	State OH	Zip Code 43604
----------------	-------------	-------------------

Purpose of Expenditure Mini Billboard, Signs	Category/ Type
---	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought	133304.07
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 0 1 / 2 0 0 8

Amount
50279.25

Transaction ID: SE.11452

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

Full Name (Last, First, Middle, Initial) of Payee
K & R Industries

Mailing Address
14110 Sullyfield Circle

City Chantilly	State VA	Zip Code 20151
-------------------	-------------	-------------------

Purpose of Expenditure Lapel Pins	Category/ Type
--------------------------------------	-------------------

Name of Federal Candidate supported or Opposed by expenditure:
BARACK OBAMA

Calendar Year-To-Date Per Election for Office Sought	140533.07
---	-----------

Date
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 8

Amount
7229.00

Transaction ID: SE.11473

Office Sought: House State: _____
 Senate District: _____
 Presidential

Check One: Support Oppose

Disbursement For: Primary General
 Other (specify) : _____
2008

(a) SUBTOTAL of Itemized Independent Expenditures	57508.25
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	57508.25

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Assistant Treasurer Patrick R. Perno
Signature

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