

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

TEAMSTERS LOCAL 745 DRIVE

ADDRESS (number and street) 1007 JONELLE ST

Check if different than previously reported. (ACC) DALLAS TX 75217

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00004440

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 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- | | | | |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8) | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9) | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE) |

- (c) 12-Day **PRE-Election** Report for the:
- | | | |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P) | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) | |

Election on _____ in the State of _____

- (d) 30-Day **Post -Election** Report for the:
- | | | |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on _____ in the State of _____

5. Covering Period 07 01 2008 through 09 30 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 Brent Taylor

Signature of Treasurer Electronically Filed by Brent Taylor Date 10 13 2008

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							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
TEAMSTERS LOCAL 745 DRIVE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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; border-collapse: collapse;"><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		203378.33
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	150602.39									
(c) Total Receipts (from Line 19)	2511.96	10719.76								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	153114.35	214098.09								
7. Total Disbursements (from Line 31)	9152.80	70136.54								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	143961.55	143961.55								
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
TEAMSTERS LOCAL 745 DRIVE

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	9

D	D
3	0

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	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	1248.00	4709.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	1248.00	4709.00
(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)	1248.00	4709.00
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.)	1263.96	6010.76
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))	2511.96	10719.76
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	2511.96	10719.76

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) 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.....	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.....	1000.00	19500.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
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.....	8152.80	50636.54
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))..	9152.80	70136.54
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9152.80	70136.54

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	1248.00	4709.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1248.00	4709.00
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:	PAGE 6 / 14
(check only one)	
<input 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 checked="" 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)
TEAMSTERS LOCAL 745 DRIVE

A.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 07 / 01 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5192
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 212.33
	FEC ID number of contributing federal political committee. C	CD Interest Income
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3583.78

B.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 07 / 01 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5193
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 23.78
	FEC ID number of contributing federal political committee. C	Money Market Dividends
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3607.56

C.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 07 / 21 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5196
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 20.71
	FEC ID number of contributing federal political committee. C	Money Market Dividends
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3628.27

SUBTOTAL of Receipts This Page (optional)	256.82
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 7 / 14
	<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 checked="" type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 745 DRIVE

A.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 07 / 21 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5197
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 205.48
	FEC ID number of contributing federal political committee. C	CD Interest Income
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3833.75

B.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5200
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 22.10
	FEC ID number of contributing federal political committee. C	Money Market Dividends
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 3855.85

C.	Full Name (Last, First, Middle Initial) Edward Jones	Date of Receipt MM / DD / YYYY 08 / 20 / 2008
	Mailing Address 201 Progress Parkway	Transaction ID: SA17.5201
	City State Zip Code Maryland Heights MD 63043-3042	Amount of Each Receipt this Period 212.34
	FEC ID number of contributing federal political committee. C	CD Interest Income
	Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 4068.19

SUBTOTAL of Receipts This Page (optional)	439.92
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 8 / 14
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
TEAMSTERS LOCAL 745 DRIVE

A. Full Name (Last, First, Middle Initial)
Van Kampen Investment

Mailing Address 2900 Legacy Dr

City State Zip Code
Plano TX 75023-2169

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1478.01

Date of Receipt
MM / DD / YYYY
07 / 09 / 2008

Transaction ID: SA17.5194

Amount of Each Receipt this Period
173.09

Interest Income

B. Full Name (Last, First, Middle Initial)
Van Kampen Investment

Mailing Address 2900 Legacy Dr

City State Zip Code
Plano TX 75023-2169

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1651.04

Date of Receipt
MM / DD / YYYY
07 / 09 / 2008

Transaction ID: SA17.5195

Amount of Each Receipt this Period
173.03

Interest Income

C. Full Name (Last, First, Middle Initial)
Van Kampen Investment

Mailing Address 2900 Legacy Dr

City State Zip Code
Plano TX 75023-2169

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1824.06

Date of Receipt
MM / DD / YYYY
08 / 08 / 2008

Transaction ID: SA17.5199

Amount of Each Receipt this Period
173.02

Interest Income

SUBTOTAL of Receipts This Page (optional) ► **519.14**

TOTAL This Period (last page this line number only) ► **1215.88**

**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 9 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

A.

Full Name (Last, First, Middle Initial)
ERIC ROBERSON FOR CONGRESS CAMPAIGN

Transaction ID: SB23.5207

Date of Disbursement

Mailing Address 4514 COLE AVENUE SUITE 300

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	6		2	0	0	8

City State Zip Code
DALLAS TX 75205

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Contribution - Congress District 32

Category/
Type

Candidate Name
ERIC ROBERSON FOR CONGRESS CAMPAIGN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 32

SUBTOTAL of Disbursements This Page (optional) ►

1000.00

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

1000.00

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 10 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Rick Avalos</p> <p>Mailing Address P.O. Box 746</p> <p>City Fabenas State TX Zip Code 79838</p> <p>Purpose of Disbursement Lost Time Wages - Voter Registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5216</p> <p>Date of Disbursement 08 / 13 / 2008</p> <p>Amount of Each Disbursement this Period 178.08</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Don Adams Campaign</p> <p>Mailing Address 1335 N. Beltline Rd. Suite 15</p> <p>City Irving State TX Zip Code 75061</p> <p>Purpose of Disbursement Contribution - Criminal District 4</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5212</p> <p>Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Eric Moyae Campaign</p> <p>Mailing Address 2001 Bryan Towerm, Ste 2000</p> <p>City Dallas State TX Zip Code 75201-3001</p> <p>Purpose of Disbursement Contribution - 14th Civil District</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5211</p> <p>Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2178.08

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 11 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

A.	Full Name (Last, First, Middle Initial) John Creuzot Campaign	Transaction ID: SB29.5210 Date of Disbursement																			
	Mailing Address P.O. Box 181268	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
	City Dallas State TX Zip Code 75218	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - Criminal District 4	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/ Type																			
	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) ▼																			

B.	Full Name (Last, First, Middle Initial) Ken Molberg Campaign	Transaction ID: SB29.5213 Date of Disbursement																			
	Mailing Address 2214 Main Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
	City Dallas State TX Zip Code 75201	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - 95th Civil District	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/ Type																			
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) Lorraine Raggio Campaign	Transaction ID: SB29.5209 Date of Disbursement																			
	Mailing Address P.O. Box600758 #777	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>8</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		0	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	8		0	6		2	0	0	8												
	City Dallas State TX Zip Code 75260	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution - 162nd Civil District	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/ Type																			
	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) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00
3000.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

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 12 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

<p>A. Full Name (Last, First, Middle Initial) Rain Minns Campaign</p> <p>Mailing Address 381 Casa Linda Plaza, #367</p> <p>City Dallas State TX Zip Code 75218</p> <p>Purpose of Disbursement Contribution - State Senate District 16</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5214</p> <p>Date of Disbursement 08 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Diana Reed</p> <p>Mailing Address 905 S. Main St. #241</p> <p>City Euless State TX Zip Code 76040</p> <p>Purpose of Disbursement Lost Time Wages - Voter Registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5203</p> <p>Date of Disbursement 07 / 23 / 2008</p> <p>Amount of Each Disbursement this Period 179.52</p>
<p>C. Full Name (Last, First, Middle Initial) Diana Reed</p> <p>Mailing Address 905 S. Main St. #241</p> <p>City Euless State TX Zip Code 76040</p> <p>Purpose of Disbursement Lost Time Wages - Voter Registration</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.5205</p> <p>Date of Disbursement 07 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 359.04</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1538.56

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 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

A.	Full Name (Last, First, Middle Initial) Diana Reed	Transaction ID: SB29.5206 Date of Disbursement 08 / 05 / 2008
	Mailing Address 905 S. Main St. #241	
	City Euleless State TX Zip Code 76040	Amount of Each Disbursement this Period 359.04
	Purpose of Disbursement Lost Time Wages - Voter Registration	
	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) Diana Reed	Transaction ID: SB29.5218 Date of Disbursement 08 / 15 / 2008
	Mailing Address 905 S. Main St. #241	
	City Euleless State TX Zip Code 76040	Amount of Each Disbursement this Period 179.52
	Purpose of Disbursement Lost Time Wages - Voter Registration	
	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) Diana Reed	Transaction ID: SB29.5219 Date of Disbursement 08 / 25 / 2008
	Mailing Address 905 S. Main St. #241	
	City Euleless State TX Zip Code 76040	Amount of Each Disbursement this Period 179.52
	Purpose of Disbursement Lost Time Wages - Voter Registration	
	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)	718.08
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 14 / 14

<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)
TEAMSTERS LOCAL 745 DRIVE

A. Full Name (Last, First, Middle Initial) Diana Reed <hr/> Mailing Address 905 S. Main St. #241 <hr/> City Euleless State TX Zip Code 76040 <hr/> Purpose of Disbursement Lost Time Wages - Voter Registration 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: SB29.5220 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 538.56
B. Full Name (Last, First, Middle Initial) Diana Reed <hr/> Mailing Address 905 S. Main St. #241 <hr/> City Euleless State TX Zip Code 76040 <hr/> Purpose of Disbursement Lost Time Wages - Voter Registration 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: SB29.5221 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 179.52

SUBTOTAL of Disbursements This Page (optional)	718.08
TOTAL This Period (last page this line number only)	8152.80