

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

ADDRESS (number and street) 1775 K STREET N.W.
 Check if different than previously reported. (ACC)
WASHINGTON DC 20006

2. **FEC IDENTIFICATION NUMBER** C00002766
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:
 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 (12G)
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 02 01 2008 through 02 29 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 ANTHONY M PERRONE

Signature of Treasurer Electronically Filed by ANTHONY M PERRONE Date 03 31 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

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		2537696.69
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	2832120.83									
(c) Total Receipts (from Line 19)	225430.94	615030.08								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	3057551.77	3152726.77								
7. Total Disbursements (from Line 31)	819617.60	914792.60								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2237934.17	2237934.17								
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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	2

D	D
2	9

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	9299.99	11712.27
(i) Itemized (use Schedule A)		
(ii) Unitemized	203956.77	591143.63
(iii) TOTAL (add Lines 11(a)(i) and (ii)	213256.76	602855.90
(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)	213256.76	602855.90
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	5000.00	5000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	7174.18	7174.18
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))	225430.94	615030.08
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	225430.94	615030.08

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.....	313171.60	313221.60
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	313171.60	313221.60
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	93000.00	181000.00
24. Independent Expenditure (use Schedule E)	387366.00	387366.00
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.....	26080.00	33205.00
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))..	819617.60	914792.60
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	819617.60	914792.60

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)	213256.76	602855.90
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	213256.76	602855.90
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	313171.60	313221.60
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	313171.60	313221.60

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 6 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) SANDRA L ALDRIDGE		Date of Receipt	
	Mailing Address 505 North Highway 169 Suite 755		M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9383
	Plymouth	MN	55441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼ 300.00		

B.	Full Name (Last, First, Middle Initial) CAROL J BILLMAN		Date of Receipt	
	Mailing Address 505 North Highway 169 Suite 755		M M / D D / Y Y Y Y Y 0 2 / 2 1 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9353
	Plymouth	MN	55441	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) DENNIS R BURGET		Date of Receipt	
	Mailing Address 7760 West 38th Avenue Suite 400		M M / D D / Y Y Y Y Y 0 2 / 0 7 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA11AI.9735
	Wheat Ridge	CO	80033	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		299.99	
Name of Employer UFCW LOCAL 0007R		Occupation L/U REPRESENTATIVE		
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼ 299.99		

SUBTOTAL of Receipts This Page (optional)	899.99
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 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) NANCY L CARLSON	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9416
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

B.	Full Name (Last, First, Middle Initial) CALVIN P CRANDALL	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9347
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

C.	Full Name (Last, First, Middle Initial) DON A DANIELSON	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9409
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

SUBTOTAL of Receipts This Page (optional)	900.00
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: (check only one)	PAGE 8 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) DOUGLAS L DEHMER		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9418
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) BETHEL J EHLENFELDT		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9028
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) STEVEN D GOODERUM		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9395
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) <input type="checkbox"/> Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

**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 9 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) WARREN L HARTMAN	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.8422
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

B.	Full Name (Last, First, Middle Initial) PAUL HENRY	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9355
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

C.	Full Name (Last, First, Middle Initial) JULIE A HILDEN	Date of Receipt MM / DD / YYYY 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9059
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other	Aggregate Year-to-Date 300.00

SUBTOTAL of Receipts This Page (optional)	900.00
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 10 / 40
(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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)
AMANDA E HOEM

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9373
 Amount of Each Receipt this Period: 300.00

B.

Full Name (Last, First, Middle Initial)
THERESA KICK

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9397
 Amount of Each Receipt this Period: 300.00

C.

Full Name (Last, First, Middle Initial)
GREGORY L LARSON

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9389
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) **900.00**

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 11 / 40
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial)
JOHN M LEGO

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9379
 Amount of Each Receipt this Period: 300.00

B. Full Name (Last, First, Middle Initial)
JOSEPH T MALTESE

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9399
 Amount of Each Receipt this Period: 300.00

C. Full Name (Last, First, Middle Initial)
RICHARD W MILBRATH

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9371
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) **900.00**

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: (check only one)	PAGE 12 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) STEVEN P MILNER		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9363
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

B.	Full Name (Last, First, Middle Initial) THOMAS J POTVIN		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9391
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

C.	Full Name (Last, First, Middle Initial) DOUGLAS RIGERT		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 2 1 / 2 0 0 8
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9341
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 900.00
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 40
(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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)
COLLEEN A RYAN

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9420
 Amount of Each Receipt this Period: 300.00

B.

Full Name (Last, First, Middle Initial)
RAYMOND M SAWICKY

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9381
 Amount of Each Receipt this Period: 300.00

C.

Full Name (Last, First, Middle Initial)
MARY K SCHMIDT

Mailing Address 505 North Highway 169
Suite 755

City Plymouth State MN Zip Code 55441

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

Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE

Receipt For: 2008
 Primary General
 Other (specify) Other

Aggregate Year-to-Date 300.00

Date of Receipt: 02 / 21 / 2008
Transaction ID: SA11AI.9345
 Amount of Each Receipt this Period: 300.00

SUBTOTAL of Receipts This Page (optional) **900.00**

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: (check only one)	PAGE 14 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) JAMES SCHOMMER		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9349
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
			<input type="text" value="300.00"/>

B.	Full Name (Last, First, Middle Initial) WILLIAM P SPARTZ		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9375
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
			<input type="text" value="300.00"/>

C.	Full Name (Last, First, Middle Initial) MARK A SWANSON		Date of Receipt
	Mailing Address 505 North Highway 169 Suite 755		<input type="text" value="02"/> / <input type="text" value="21"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	Plymouth	MN	55441
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.9385
Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Other		Aggregate Year-to-Date ▼	<input type="text" value="300.00"/>
			<input type="text" value="300.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="900.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 15 / 40
	<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) MATTHEW P UTECHT	Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9422
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 300.00	

B.	Full Name (Last, First, Middle Initial) NANCY K VAILLANCOURT	Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9359
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 300.00	

C.	Full Name (Last, First, Middle Initial) LORRIE D WAYMAN	Date of Receipt M M / D D / Y Y Y Y 02 / 21 / 2008
	Mailing Address 505 North Highway 169 Suite 755	Transaction ID: SA11AI.9387
	City Plymouth State MN Zip Code 55441	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer UFCW LOCAL 0653 Occupation L/U REPRESENTATIVE	
Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	900.00
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 16 / 40	
	(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"/> 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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) SHIRLEY ZACHMAN		Date of Receipt		
	Mailing Address 505 North Highway 169 Suite 755		M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8		
	City Plymouth	State MN	Zip Code 55441	Transaction ID: SA11AI.9367	
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00		
	Name of Employer UFCW LOCAL 0653		Occupation L/U REPRESENTATIVE		
	Receipt For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other		Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional)	300.00
TOTAL This Period (last page this line number only)	9299.99

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 17 / 40
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input type="checkbox"/> 12
		<input checked="" type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) MASSACHUSETTS DEMOCRATIC PARTY		Date of Receipt
	Mailing Address 56 ROLAND STREET NORTH LOBBY, SUITE 203		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 0 2 / 1 5 / 2 0 0 8
	City	State	Zip Code
	BOSTON	MA	02129
	FEC ID number of contributing federal political committee.		Transaction ID: SA16.32914
	Name of Employer		Amount of Each Receipt this Period
Occupation		<input type="text"/> 5000.00	
Receipt For: 2008		REFUND	
<input type="checkbox"/> Primary	<input type="checkbox"/> General		
<input checked="" type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼		
OTHER	<input type="text"/> 5000.00		

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 5000.00
TOTAL This Period (last page this line number only)	<input type="text"/> 5000.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 18 / 40	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<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)
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) CHEVY CHASE BANK		Date of Receipt	
	Mailing Address 6151 CHEVY CHASE DRIVE		M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 8	
	City	State	Zip Code	Transaction ID: SA17.10456
	LAUREL	MD	20707	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
C		7174.18		
Name of Employer		Occupation		
Receipt For: 2008		Aggregate Year-to-Date ▼		
<input type="checkbox"/> Primary	<input type="checkbox"/> General	7174.18		
<input checked="" type="checkbox"/> Other (specify) ▼ Other				

SUBTOTAL of Receipts This Page (optional)	7174.18
TOTAL This Period (last page this line number only)	7174.18

**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 19 / 40

<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)

ABAR HUTTON MEDIA

Mailing Address 6190 GROVEDALE COURT #200

City ALEXANDRIA State VA Zip Code 22310

Purpose of Disbursement
MEDIA CAMPAIGN

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Other

Transaction ID: SB21B.10458

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

279630.00

B.

Full Name (Last, First, Middle Initial)

CHEVY CHASE BANK

Mailing Address 6151 CHEVY CHASE DRIVE

City LAUREL State MD Zip Code 20707

Purpose of Disbursement
January 2008 bank service fees.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Other

Transaction ID: SB21B.10459

Date of Disbursement

02 / 26 / 2008

Amount of Each Disbursement this Period

40.00

C.

Full Name (Last, First, Middle Initial)

VOCUS, INC.

Mailing Address 4296 FORBES BLVD

City LANHAM State MD Zip Code 20706

Purpose of Disbursement
FEDERAL / STATE REPORTING SUPPLIES

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

OTHER

Transaction ID: SB21B.32916

Date of Disbursement

02 / 19 / 2008

Amount of Each Disbursement this Period

33501.60

SUBTOTAL of Disbursements This Page (optional)

313171.60

TOTAL This Period (last page this line number only)

313171.60

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)
AL GREEN FOR CONGRESS

Transaction ID: SB23.10479
Date of Disbursement

Mailing Address 3003 SOUTH LOOP WEST
SUITE 321

02 / 25 / 2008

City HOUSTON State TX Zip Code 77054

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
CONTRIBUTION TX - C.D. # 09

Category/
Type

Candidate Name
AL GREEN

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: TX District: 09

B.

Full Name (Last, First, Middle Initial)
BILL FOSTER FOR CONGRESS COMM.

Transaction ID: SB23.10478
Date of Disbursement

Mailing Address POST OFFICE BOX 703

02 / 22 / 2008

City GENEVA State IL Zip Code 60134

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
CONTRIBUTION IL - C.D. # 14

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Other

C.

Full Name (Last, First, Middle Initial)
CAROL SHEA-PORTER FOR CONGRESS

Transaction ID: SB23.10502
Date of Disbursement

Mailing Address POST OFFICE BOX 453

02 / 29 / 2008

City ROCHESTER State NH Zip Code 03866

Amount of Each Disbursement this Period

2500.00

Purpose of Disbursement
CONTRIBUTION NH - C.D. # 01

Category/
Type

Candidate Name
CAROL SHEA-PORTER

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NH District: 01

SUBTOTAL of Disbursements This Page (optional)

10500.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial)
CAROL SHEA-PORTER FOR CONGRESS

Mailing Address POST OFFICE BOX 453

City ROCHESTER State NH Zip Code 03866

Purpose of Disbursement
CONTRIBUTION NH - C.D. # 01

Candidate Name
CAROL SHEA-PORTER

Office Sought: House
 Senate
 President

State: NH District: 01

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.10503

Date of Disbursement

02 / 29 / 2008

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
DAN GRANT FOR CONGRESS

Mailing Address 6109 RICKEY DRIVE

City AUSTIN State TX Zip Code 78757

Purpose of Disbursement
CONTRIBUTION TX - C.D. # 10

Candidate Name
DAN GRANT

Office Sought: House
 Senate
 President

State: TX District: 10

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.10481

Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
DEMOCRATIC CONGRESSIONAL

Mailing Address CAMPAIGN COMMITTEE
430 SOUTH CAPITOL STREET SE

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.10467

Date of Disbursement

02 / 12 / 2008

Amount of Each Disbursement this Period

15000.00

SUBTOTAL of Disbursements This Page (optional) ►

22500.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) DEMOCRATIC NATIONAL COMMITTEE	Transaction ID: SB23.10469 Date of Disbursement
	Mailing Address 430 SOUTH CAPITOL STREET SE	<input type="text" value="02"/> / <input type="text" value="12"/> / <input type="text" value="2008"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="15000.00"/>
	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 type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other

B.	Full Name (Last, First, Middle Initial) DOGGETT FOR CONGRESS	Transaction ID: SB23.10482 Date of Disbursement
	Mailing Address POST OFFICE BOX 5843	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City AUSTIN State TX Zip Code 78763	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION TX - C.D. # 25	<input type="text" value="1000.00"/>
	Candidate Name LLOYD DOGGETT	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 25	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) EDDIE BERNICE JOHNSON FOR	Transaction ID: SB23.10484 Date of Disbursement
	Mailing Address CONGRESS 3102 MAPLE AVENUE STE 605	<input type="text" value="02"/> / <input type="text" value="25"/> / <input type="text" value="2008"/>
	City DALLAS State TX Zip Code 75201	Amount of Each Disbursement this Period
	Purpose of Disbursement CONTRIBUTION TX - C.D. # 30	<input type="text" value="500.00"/>
	Candidate Name EDDIE B JOHNSON	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 30	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="16500.00"/>
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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p>A. Full Name (Last, First, Middle Initial) EDDIE BERNICE JOHNSON FOR</p> <p>Mailing Address CONGRESS 3102 MAPLE AVENUE STE 605</p> <p>City DALLAS State TX Zip Code 75201</p> <p>Purpose of Disbursement CONTRIBUTION TX - C.D. # 30</p> <p>Candidate Name EDDIE B JOHNSON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: TX District: 30</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10485</p> <p>Date of Disbursement 02 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B. Full Name (Last, First, Middle Initial) GILLIBRAND FOR CONGRESS</p> <p>Mailing Address 514 WARREN STREET</p> <p>City HUDSON State NY Zip Code 12534</p> <p>Purpose of Disbursement CONTRIBUTION NY - C.D. # 20</p> <p>Candidate Name KIRSTEN GILLIBRAND</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 20</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10462</p> <p>Date of Disbursement 02 / 06 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) ISRAEL FOR CONGRESS</p> <p>Mailing Address POST OFFICE BOX 777</p> <p>City DEER PARK State NY Zip Code 11729</p> <p>Purpose of Disbursement CONTRIBUTION NY - C.D. # 02</p> <p>Candidate Name STEVE ISRAEL</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: NY District: 02</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB23.10471</p> <p>Date of Disbursement 02 / 20 / 2008</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) KRATOVIŁ FOR CONGRESS Mailing Address POST OFFICE BOX 518 City STEVENSVILLE State MD Zip Code 21666 Purpose of Disbursement CONTRIBUTION MD - C.D. # 01 Candidate Name FRANK KRATOVIŁ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 01 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10504 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8	Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) LAMPSON FOR CONGRESS Mailing Address 38 IVY STREET SE City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CONTRIBUTION TX - C.D. # 22 Candidate Name NICK LAMPSON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 09 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10486 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8	Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) M-PAC Mailing Address 712 35TH AVENUE City SEATTLE State WA Zip Code 98122 Purpose of Disbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10473 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 0 / 2 0 0 8	Amount of Each Disbursement this Period 5000.00

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)

PAGE 25 / 40

<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)
MONTAGANO FOR CONGRESS

Mailing Address 56022 DANA DRIVE

City BRISTOL State IN Zip Code 46507

Purpose of Disbursement
CONTRIBUTION IN - C.D. # 03

Candidate Name
MIKE MONTAGANO

Office Sought: House
 Senate
 President

State: IN District: 03

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.10465

Date of Disbursement

02 / 11 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)
ORTIZ FOR CONGRESS

Mailing Address POST OFFICE BOX 7806

City CORPUS CHRISTI State TX Zip Code 78467

Purpose of Disbursement
CONTRIBUTION TX - C.D. # 27

Candidate Name
SOLOMON P ORTIZ

Office Sought: House
 Senate
 President

State: TX District: 27

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Category/
Type

Transaction ID: SB23.10488

Date of Disbursement

02 / 25 / 2008

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
PAC TO THE FUTURE

Mailing Address 430 SOUTH CAPITOL STREET SE
1ST FLOOR

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Other

Category/
Type

Transaction ID: SB23.10461

Date of Disbursement

02 / 04 / 2008

Amount of Each Disbursement this Period

-5000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

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 26 / 40

<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) PAC TO THE FUTURE	Transaction ID: SB23.10463 Date of Disbursement 02 / 06 / 2008
	Mailing Address 430 SOUTH CAPITOL STREET SE 1ST FLOOR	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20003	
	Purpose of Disbursement	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other

B.	Full Name (Last, First, Middle Initial) PETE KING FOR CONGRESS	Transaction ID: SB23.10475 Date of Disbursement 02 / 20 / 2008
	Mailing Address COMMITTEE 164 WEST PARK AVENUE	Amount of Each Disbursement this Period 500.00
	City LONG BEACH State NY Zip Code 11561	
	Purpose of Disbursement CONTRIBUTION NY - C.D. # 03	Category/Type
	Candidate Name PETER T KING	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 03	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) REYES FOR CONGRESS	Transaction ID: SB23.10490 Date of Disbursement 02 / 25 / 2008
	Mailing Address 1011 MONTANA AVENUE	Amount of Each Disbursement this Period 1000.00
	City EL PASO State TX Zip Code 79902	
	Purpose of Disbursement CONTRIBUTION TX - C.D. # 16	Category/Type
	Candidate Name SILVESTRE REYES	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	6500.00
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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial) RICK NORIEGA FOR US SENATE <hr/> Mailing Address PO BOX 231163 <hr/> City HOUSTON State TX Zip Code 77223 <hr/> Purpose of Disbursement CONTRIBUTION US SENATE - TX <hr/> Candidate Name RICK NORIEGA <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10492 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1666.68
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) RICK NORIEGA FOR US SENATE <hr/> Mailing Address PO BOX 231163 <hr/> City HOUSTON State TX Zip Code 77223 <hr/> Purpose of Disbursement CONTRIBUTION US SENATE - TX <hr/> Candidate Name RICK NORIEGA <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10493 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1666.66
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) RICK NORIEGA FOR US SENATE <hr/> Mailing Address PO BOX 231163 <hr/> City HOUSTON State TX Zip Code 77223 <hr/> Purpose of Disbursement CONTRIBUTION US SENATE - TX <hr/> Candidate Name RICK NORIEGA <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10494 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 8
	Amount of Each Disbursement this Period 1666.66
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5000.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) ROYBAL-ALLARD FOR CONGRESS	Transaction ID: SB23.10470 Date of Disbursement 02 / 12 / 2008	
	Mailing Address 2730 WILSHIRE BLVD. SUITE 550		
	City SANTA MONICA State CA Zip Code 90403 Purpose of Disbursement CONTRIBUTION CA - C.D. # 34 Candidate Name LUCILLE ROYBAL-ALLARD Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 34	Amount of Each Disbursement this Period 2000.00	Category/ Type
B.	Full Name (Last, First, Middle Initial) RUBEN HINOJOSA FOR CONGRESS	Transaction ID: SB23.10496 Date of Disbursement 02 / 25 / 2008	
	Mailing Address 417 NEW JERSEY AVENUE SE		
	City WASHINGTON State DC Zip Code 20003 Purpose of Disbursement CONTRIBUTION TX - C.D. # 15 Candidate Name RUBEN HINOJOSA Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TX District: 15	Amount of Each Disbursement this Period 1000.00	Category/ Type
C.	Full Name (Last, First, Middle Initial) SCHWARTZ FOR CONGRESS	Transaction ID: SB23.10499 Date of Disbursement 02 / 27 / 2008	
	Mailing Address POST OFFICE BOX 2232		
	City JENKINTOWN State PA Zip Code 19046 Purpose of Disbursement CONTRIBUTION PA - C.D. # 13 Candidate Name ALLYSON SCHWARTZ 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: 13	Amount of Each Disbursement this Period 2500.00	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) SCHWARTZ FOR CONGRESS	Transaction ID: SB23.10500 Date of Disbursement 02 / 27 / 2008	
	Mailing Address POST OFFICE BOX 2232		
	City: JENKINTOWN State: PA Zip Code: 19046	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement CONTRIBUTION PA - C.D. # 13		
	Candidate Name ALLYSON SCHWARTZ	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) SHELIA JACKSON LEE FOR CONGRES	Transaction ID: SB23.10498 Date of Disbursement 02 / 25 / 2008	
	Mailing Address 4412 ALMEDA ROAD		
	City: HOUSTON State: TX Zip Code: 77004	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement CONTRIBUTION TX - C.D. # 18		
	Candidate Name SHEILA JACKSON-LEE	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) THE NIKI TSONGAS COMMITTEE	Transaction ID: SB23.10506 Date of Disbursement 02 / 29 / 2008	
	Mailing Address POST OFFICE BOX 1454		
	City: LOWELL State: MA Zip Code: 01854	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement CONTRIBUTION MA - C.D. # 05		
	Candidate Name NIKI TSONGAS	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial) THE NIKI TSONGAS COMMITTEE <hr/> Mailing Address POST OFFICE BOX 1454 <hr/> City LOWELL State MA Zip Code 01854 <hr/> Purpose of Disbursement CONTRIBUTION MA - C.D. # 05 <hr/> Candidate Name NIKI TSONGAS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 05 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Category/ Type	Transaction ID: SB23.10507 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 2500.00
	B. Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS <hr/> Mailing Address PO BOX 437 <hr/> City FARMINGTON State NY Zip Code 11738 <hr/> Purpose of Disbursement CONTRIBUTION NY - C.D. # 01 <hr/> Candidate Name TIM BISHOP <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ <hr/> Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

93000.00

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 31 / 40

<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)
AMODEO FOR ASSEMBLY

Transaction ID: SB29.10533
Date of Disbursement

Mailing Address 304 YARMOUTH DRIVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	9		2	0	0	8

City State Zip Code
EGG HARBOR TOWNSHI NJ 08234

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION ASSEMBLY - NJ

500.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CITIZENS FOR TACKETT

Transaction ID: SB29.10516
Date of Disbursement

Mailing Address 1406 MCGILLIVRAY AVENUE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City State Zip Code
SPRINGFIELD OH 45503

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION STATE SENATE - OH

500.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
COMMITTEE TO KEEP KEITH AUDITO

Transaction ID: SB29.10514
Date of Disbursement

Mailing Address 241 TOPTON DRIVE

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	7		2	0	0	8

City State Zip Code
VANDALIA OH 45377

Amount of Each Disbursement this Period

Purpose of Disbursement
CONTRIBUTION AUDITOR - OH

200.00

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1200.00

TOTAL This Period (last page this line number only)

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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 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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial) DANN FOR OHIO <hr/> Mailing Address 1179 ACADEMY DRIVE <hr/> City YOUNGSTOWN State OH Zip Code 44505 <hr/> Purpose of Disbursement CONTRIBUTION ATTY GENERAL - OH Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.10535 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) ELECT BILL KORTZ COMMITTEE <hr/> Mailing Address 514 RIDGEVIEW DRIVE <hr/> City DRAVOSBURG State PA Zip Code 15034 <hr/> Purpose of Disbursement CONTRIBUTION STATE HOUSE - PA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.10537 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 250.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) FRIENDS OF BOMPIANI <hr/> Mailing Address 304 ALICIA COURT <hr/> City GREENSBURG State PA Zip Code 15601 <hr/> Purpose of Disbursement CONTRIBUTION STATE SENATE - PA Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.10539 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8
	Amount of Each Disbursement this Period 200.00
	Category/ Type
	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

5450.00

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 34 / 40

<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

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial) HISPANIC COMMITTEE OF VIRGINIA <hr/> Mailing Address 5827 COLUMBIA PIKE #200 <hr/> City FALLS CHURCH State VA Zip Code 22041 <hr/> Purpose of Disbursement CONTRIBUTION 2008 Candidate Name <input type="text"/> Category/Type	Transaction ID: SB29.10531 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1500.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	
B. Full Name (Last, First, Middle Initial) NAACP <hr/> Mailing Address POST OFFICE BOX 90988 <hr/> City WASHINGTON State DC Zip Code 20001 <hr/> Purpose of Disbursement NON-FEDERAL CONTRIBUTION 2008 Candidate Name <input type="text"/> Category/Type	Transaction ID: SB29.10522 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 2250.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	
C. Full Name (Last, First, Middle Initial) OHIO DEMOCRATIC PARTY <hr/> Mailing Address 340 EAST FULTON STREET <hr/> City COLUMBUS State OH Zip Code 43215 <hr/> Purpose of Disbursement NON-FEDERAL CONTRIBUTION 2008 Candidate Name <input type="text"/> Category/Type	Transaction ID: SB29.10528 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 1 / 2 0 0 8
	Amount of Each Disbursement this Period 10000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	

SUBTOTAL of Disbursements This Page (optional) ▶

13750.00

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 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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A. Full Name (Last, First, Middle Initial) PENNSYLVANIA AFL-CIO <hr/> Mailing Address 231 STATE STREET 7TH FLOOR <hr/> City HARRISBURG State PA Zip Code 17101 <hr/> Purpose of Disbursement NON-FEDERAL CONTRIBUTION 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB29.10541 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 780.00
	Category/Type
B. Full Name (Last, First, Middle Initial) PRINCE GEORGE'S COUNTY NAACP <hr/> Mailing Address 9201 BASIL COURT SUITE 115 <hr/> City LARGO State MD Zip Code 20774 <hr/> Purpose of Disbursement NON-FEDERAL CONTRIBUTION 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB29.10512 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 100.00
	Category/Type
C. Full Name (Last, First, Middle Initial) SENATE DEMOCRATIC MAJORITY <hr/> Mailing Address C/O STEPHANIE WOHLRAB 213 EDGEWOOD ROAD <hr/> City LINDENN State NJ Zip Code 07036 <hr/> Purpose of Disbursement NON-FEDERAL CONTRIBUTION 2008 Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Other	Transaction ID: SB29.10526 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 8 <hr/> Amount of Each Disbursement this Period 1500.00
	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶

2380.00

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 36 / 40

<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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)

YOST FOR SENATE

Mailing Address 1413 PLEASANT AVENUE

City State Zip Code
WELLSBURG WV 26070

Purpose of Disbursement
CONTRIBUTION STATE SENATE - WV

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.10543

Date of Disbursement

MM / DD / YYYY
02 / 29 / 2008

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional)

200.00

TOTAL This Period (last page this line number only)

26080.00

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB	FEC IDENTIFICATION NUMBER C C00002766
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice	

Full Name (Last, First, Middle, Initial) of Payee
ABAR HUTTON MEDIA, LLC

Date
MM / DD / YYYY
02 / 26 / 2008

Mailing Address
6190 GROVEDALE COURT
SUITE 200

Amount
99330.00

City State Zip Code
ALEXANDRIA VA 22310

Transaction ID: SE.7384

Purpose of Expenditure Category/Type
MEDIA 004

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

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2008 99330.00

Disbursement For: Primary General
 Other (specify) : _____

Full Name (Last, First, Middle, Initial) of Payee
ABAR HUTTON MEDIA, LLC

Date
MM / DD / YYYY
02 / 27 / 2008

Mailing Address
6190 GROVEDALE COURT
SUITE 200

Amount
89825.00

City State Zip Code
ALEXANDRIA VA 22310

Transaction ID: SE.7391

Purpose of Expenditure Category/Type
MEDIA 004

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

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
2008 189155.00

Disbursement For: Primary General
 Other (specify) : _____

(a) SUBTOTAL of Itemized Independent Expenditures	189155.00
(b) SUBTOTAL of Unitemized Independent Expenditures	_____
(c) TOTAL Independent Expenditures	_____

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.

ANTHONY M PERRONE
Signature

Date MM / DD / YYYY
03 / 31 / 2009

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB		FEC IDENTIFICATION NUMBER C C00002766
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice		

Full Name (Last, First, Middle, Initial) of Payee
ABAR HUTTON MEDIA, LLC

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

Mailing Address
6190 GROVEDALE COURT
SUITE 200

Amount
92020.00

City State Zip Code
ALEXANDRIA VA 22310

Transaction ID: SE.7395
Office Sought: House State: OH
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
MEDIA 004

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
281175.00

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

Full Name (Last, First, Middle, Initial) of Payee
ABAR HUTTON MEDIA, LLC

Date
M M / D D / Y Y Y Y
0 2 / 2 9 / 2 0 0 8

Mailing Address
6190 GROVEDALE COURT
SUITE 200

Amount
96195.00

City State Zip Code
ALEXANDRIA VA 22310

Transaction ID: SE.7396
Office Sought: House State: OH
 Senate District: _____
 Presidential

Purpose of Expenditure Category/Type
MEDIA 004

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

Check One: Support Oppose

Calendar Year-To-Date Per Election for Office Sought
377370.00

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

(a) SUBTOTAL of Itemized Independent Expenditures	188215.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	

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.

ANTHONY M PERRONE
Signature

Date M M / D D / Y Y Y Y
0 3 / 3 1 / 2 0 0 9

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

NAME OF COMMITTEE (In Full) UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB		FEC IDENTIFICATION NUMBER C C00002766	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee BRUCE L KAZARSKI		Date M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 0 8	
Mailing Address 7321 WILLOW AVENUE		Amount 9996.00	
City TACOMA PARK		State MD	Zip Code 20912
Purpose of Expenditure MEDIA		Category/ Type	004
Name of Federal Candidate supported or Opposed by expenditure: DONNA EDWARDS		Transaction ID: SE.4105	
		Office Sought: <input checked="" type="checkbox"/> House State: MD <input type="checkbox"/> Senate District: 04 <input type="checkbox"/> Presidential	
		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) : _____ 2008	
Calendar Year-To-Date Per Election for Office Sought		9996.00	

(a) SUBTOTAL of Itemized Independent Expenditures	9996.00
(b) SUBTOTAL of Unitemized Independent Expenditures	
(c) TOTAL Independent Expenditures	387366.00
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.	
ANTHONY M PERRONE Signature	Date M M / D D / Y Y Y Y 0 3 / 3 1 / 2 0 0 9

Image# 29991871109

Form/Schedule: **F3XA**
Transaction ID:

The Detailed Summary Page and Schedule A reflect the amount of unitemized (\$203,956.77) and itemized (\$9,299.99) receipts.

Form/Schedule: **SB21B**
Transaction ID: **SB21B.10458**

Prepaid independent expenditure which will be reported on Schedule E when disseminated.
