

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
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

ADDRESS (number and street) 8000 EAST JEFFERSON
Check if different than previously reported. (ACC) DETROIT MI 48214

2. FEC IDENTIFICATION NUMBER C00002840
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 11 07 2006 in the State of MI
(d) 30-Day Post -Election Report for the: General (30G) Runoff (30R) Special (30S)
Election on in the State of

5. Covering Period 10 01 2006 through 10 18 2006

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 Elizabeth Bunn

Signature of Treasurer Electronically Filed by Elizabeth Bunn Date 10 23 2006

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

	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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		11201508.24
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	8129621.89									
(c) Total Receipts (from Line 19)	859636.47	5210651.09								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	8989258.36	16412159.33								
7. Total Disbursements (from Line 31)	1602529.58	9025430.55								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7386728.78	7386728.78								
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

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
1	0

D	D
1	8

Y	Y	Y	Y
2	0	0	6

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	24435.95	101114.13
(i) Itemized (use Schedule A)		
(ii) Unitemized	835200.52	5056970.81
(iii) TOTAL (add Lines 11(a)(i) and (ii)	859636.47	5158084.94
(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)	859636.47	5158084.94
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	3000.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	49566.15
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))	859636.47	5210651.09
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	859636.47	5210651.09

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.....	12070.58	615131.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12070.58	615131.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	100000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	274000.00	1471850.00
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	986.50
(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	986.50
29. Other Disbursements.....	1316459.00	6837462.76
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))..	1602529.58	9025430.55
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	1602529.58	9025430.55

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)	859636.47	5158084.94
34. Total Contribution Refunds (from Line 28(d))	0.00	986.50
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	859636.47	5157098.44
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12070.58	615131.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	12070.58	615131.29

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 6 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. GENEVIEVE ABERNATHY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 47 SOENKER CIRCLE		Transaction ID: SA11A1.71697	
City State Zip Code ST. PETERS MO 63376	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED	Aggregate Year-to-Date ▼ 300.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. DENIESE ALEJANDRO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 196 N. CLAREMONT AVENUE		Transaction ID: SA11A1.73100	
City State Zip Code SAN JOSE CA 95127	Amount of Each Receipt this Period 305.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation NEW UNITED MOTORS MFG FACTORY WORKER	Aggregate Year-to-Date ▼ 805.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. JEFFREY H ARMSTRONG		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1011 HORIZON WAY		Transaction ID: SA11A1.73219	
City State Zip Code MARTINSBURG WV 25401-1029	Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER	Aggregate Year-to-Date ▼ 312.00		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	607.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ANTHONY ARQUIETT		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 196 MCCARTHY RD		Transaction ID: SA11A1.72317
City BRASHER FALLS	State NY	Zip Code 13613-3253
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. THOMAS ATHMANN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 3628 BIRDSONG LN		Transaction ID: SA11A1.71851
City JANESVILLE	State WI	Zip Code 53548-8503
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.00	

Full Name (Last, First, Middle Initial) C. WILLIAM D AVERITT		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 33 DUNN LN		Transaction ID: SA11A1.71650
City TROY	State MO	Zip Code 63379-2701
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	144.00
TOTAL This Period (last page this line number only) ▶	_____

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 111
	<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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UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ERNEST BACA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 43226 MONTROSE AVE		Transaction ID: SA11A1.73438	
City State Zip Code FREMONT CA 94538		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. LARRY J BALL		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 7303 WITLING BLVD		Transaction ID: SA11A1.73620	
City State Zip Code ROANOKE IN 46783-9311		Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. SHANON BANE-REPLOGLE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 127 C R 319B		Transaction ID: SA11A1.72769	
City State Zip Code ALVARADO TX 76009		Amount of Each Receipt this Period 52.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation Occupation FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 208.00	

SUBTOTAL of Receipts This Page (optional) ▶	412.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. PAMELA J BARGER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2055 ONTARIO CIR		Transaction ID: SA11A1.71421
City State Zip Code FORT WAYNE IN 46802-6737	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. THOMAS BARTON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 24353 BUCKLAND HOLDEN RD		Transaction ID: SA11A1.73650
City State Zip Code WAYNESFIELD OH 45896-9405	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. CARL BAUER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 616 HOLGATE AVE		Transaction ID: SA11A1.72814
City State Zip Code DEFIANCE OH 43512-2038	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	290.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
KEVIN BEASLEY

Mailing Address 1515 13TH ST

City State Zip Code
BEDFORD IN 47421-3111

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72912

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
PETER BEHRENSPRUNG

Mailing Address 1628 MICHIGAN AVENUE

City State Zip Code
SHEBOYGAN WI 53081-3273

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

Name of Employer Occupation
KÖHLER CO FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 266.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72368

Amount of Each Receipt this Period
50.00

C. Full Name (Last, First, Middle Initial)
CHAD BENNER

Mailing Address 2509 GENOA RD

City State Zip Code
PERRYSBURG OH 43551

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 237.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.72237

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional)	▶	135.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 11 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
MICHAEL J. BINK

Mailing Address W 2260 COUNTY ROAD

City OCONOMOWOC State WI Zip Code 53066-9545

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

Name of Employer AMERICAN BRANDS Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 263.50

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 0 / 2 0 0 6

Transaction ID: SA11A1.72739

Amount of Each Receipt this Period
8.50

B. Full Name (Last, First, Middle Initial)
MICHAEL J. BINK

Mailing Address W 2260 COUNTY ROAD

City OCONOMOWOC State WI Zip Code 53066-9545

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

Name of Employer AMERICAN BRANDS Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.71310

Amount of Each Receipt this Period
8.50

C. Full Name (Last, First, Middle Initial)
PAUL BLUTO

Mailing Address 1525 KROEGER AVE

City FULLERTON State CA Zip Code 92631

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.72864

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	317.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
GARY BOERGER

Mailing Address 10306 S 235TH EAST AVE

City State Zip Code
BROKEN ARROW OK 74014-3713

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

Name of Employer Occupation
FORD MOTOR COMPANY FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73365

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
TRENT E BOGLE

Mailing Address 2608 LYONS AVE

City State Zip Code
LANSING MI 48910-3337

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71839

Amount of Each Receipt this Period
70.00

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

Mailing Address 25400 PECHANGA RD

City State Zip Code
TEMECULA CA 92592

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.72437

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	430.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 111
	<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RONALD L BRAGG		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 3060 THISTLE BEND CT		Transaction ID: SA11A1.73927	
City State Zip Code MURFREESBORO TN 37130-0322		Amount of Each Receipt this Period 61.00	
FEC ID number of contributing federal political committee. C			
Name of Employer RYDER SYSTEMS		Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 244.00	

Full Name (Last, First, Middle Initial) B. JAMES W BRAUN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 538 JEFFERSON ST		Transaction ID: SA11A1.71552	
City State Zip Code CARLSTADT NJ 07072-1843		Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY		Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. TODD BRIEN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 2723 CUMBERLAND DR		Transaction ID: SA11A1.71495	
City State Zip Code JANESVILLE WI 53546-4347		Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION		Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 279.00	

SUBTOTAL of Receipts This Page (optional) ▶	136.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 14 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
MARLON W BROWN

Mailing Address 2347 GARDNER DR

City SAINT LOUIS State MO Zip Code 63136-5420

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 208.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71617

Amount of Each Receipt this Period
52.00

B. Full Name (Last, First, Middle Initial)
DON BURGESS

Mailing Address 50 HARVEST HILL LANE

City SILEX State MO Zip Code 63377

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.72824

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
ARCHIE BUTTRAM

Mailing Address 1205 NE 77TH ST.

City GLADSTONE State MO Zip Code 64118

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

Name of Employer Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.72386

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	652.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. GEORGE C CABOURG		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 162 HAWORTH DR		Transaction ID: SA11A1.73851
City State Zip Code HAWORTH NJ 07641-1530	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

Full Name (Last, First, Middle Initial) B. ROBERT CAMARA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 83 BARBERRY LANE ALT DIST		Transaction ID: SA11A1.73198
City State Zip Code O FALLON MO 63366	Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 835.00	

Full Name (Last, First, Middle Initial) C. TIMOTHY CAMPBELL		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 15098 PINEHURST		Transaction ID: SA11A1.73019
City State Zip Code DETROIT MI 48238	Amount of Each Receipt this Period 105.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	330.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DANIEL D CARO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 26 E. MADRID DR		Transaction ID: SA11A1.71598	
City TUCSON	State AZ	Zip Code 85704	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation RETIRED	Aggregate Year-to-Date ▼ 300.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) B. SARAH ARTIS CAROTHERS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address P O BOX 152451		Transaction ID: SA11A1.72367	
City ARLINGTON	State TX	Zip Code 76015	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation RETIRED	Aggregate Year-to-Date ▼ 300.00	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) C. DONNA CARTER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 1450 DELAWARE		Transaction ID: SA11A1.72410	
City TOLEDO	State OH	Zip Code 43606	Amount of Each Receipt this Period 18.75
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For:	Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 243.75	
<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

SUBTOTAL of Receipts This Page (optional) ▶	618.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) DAVID CHADWELL		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6
Mailing Address 4351 POST RAIL LN		Transaction ID: SA11A1.72043
City State Zip Code FRANKLIN OH 45005-4950	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer MILLER BREWING	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 600.00	

B. Full Name (Last, First, Middle Initial) PAUL M CHMURA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 660 ROUTE 39		Transaction ID: SA11A1.72841
City State Zip Code FORESTVILLE NY 14062-9582	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C. Full Name (Last, First, Middle Initial) STEVE CLERE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 4625 BROWN RD		Transaction ID: SA11A1.72065
City State Zip Code OREGON OH 43618-9745	Amount of Each Receipt this Period 31.25	
FEC ID number of contributing federal political committee. C		
Name of Employer TOLEDO TECHNOLOGIES	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 362.50	

SUBTOTAL of Receipts This Page (optional) ▶	171.25
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 18 / 111
	<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) ROBERT E COLBY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 2307 N CLINTON ST		Transaction ID: SA11A1.73934
City State Zip Code SAGINAW MI 48602-5070	Amount of Each Receipt this Period 288.00	
FEC ID number of contributing federal political committee. C		
Name of Employer General Motors	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

B. Full Name (Last, First, Middle Initial) SUE A CONNER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 3492 W. 500 S		Transaction ID: SA11A1.73788
City State Zip Code SHARPSVILLE IN 46068-9408	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) JAVIER S CONTRERAS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6
Mailing Address 24698 WILLIMET WAY		Transaction ID: SA11A1.73830
City State Zip Code HAYWARD CA 94544-1146	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	618.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RAYMUNDO CONTRERAS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 12812 HARVEST AVE.		Transaction ID: SA11A1.73915	
City State Zip Code NORWALK CA 90650		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FORD MOTOR COMPANY FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. DANIEL E COOK		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 844 N. CLINTON LOT C-41		Transaction ID: SA11A1.72942	
City State Zip Code DEFIANCE OH 43512		Amount of Each Receipt this Period 24.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation DEFIANCE PRECISION PRODUCTS FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 204.00	

Full Name (Last, First, Middle Initial) C. RITA CORRIGAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 2050 CARABEL AVE		Transaction ID: SA11A1.73012	
City State Zip Code LAKEWOOD OH 44107-5702		Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FORD MOTOR COMPANY FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	414.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 20 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
RAUL CORTINAS

Mailing Address 4663 HEATHERBROOK LN

City State Zip Code
GRAND PRAIRIE TX 75052-3558

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 202.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73251

Amount of Each Receipt this Period
50.50

B. Full Name (Last, First, Middle Initial)
LLOYD COX

Mailing Address 3805 HARROGATE DR.

City State Zip Code
NORMAN OK 73072

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.73916

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
DALE CREED

Mailing Address 12455 LEFFINGWELL RD

City State Zip Code
BERLIN CENTER OH 44401-9608

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73683

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	410.50
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 21 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
DANNY R CROSS

Mailing Address 38 BRIDGEVIEW DR.

City State Zip Code
ELKTON MD 21921

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

Name of Employer Occupation
DAIMLERCHRYSLER FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71581

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
ROBERT CUNNINGHAM

Mailing Address 801 WELLER AVENUE

City State Zip Code
HAMILTON OH 45015-1568

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

Name of Employer Occupation
PHILIP MORRIS FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 562.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72998

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
ROBERT CUNNINGHAM

Mailing Address 801 WELLER AVENUE

City State Zip Code
HAMILTON OH 45015-1568

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

Name of Employer Occupation
PHILIP MORRIS FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 587.50

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA11A1.72746

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 140.00

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 22 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. TONY E CURINGTON SR		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 250 TRAILWOODS DR		Transaction ID: SA11A1.72137
City State Zip Code DAYTON OH 45415-2616	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00	

Full Name (Last, First, Middle Initial) B. FRANK J DALESSANDRO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 90 PROSPECT AVE APT 8B		Transaction ID: SA11A1.73232
City State Zip Code HACKENSACK NJ 07601-1957	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 325.00	

Full Name (Last, First, Middle Initial) C. JEFFERY A DAVIS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 6889 WAGONER		Transaction ID: SA11A1.71489
City State Zip Code PERRYSBURG OH 43551	Amount of Each Receipt this Period 31.25	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.25	

SUBTOTAL of Receipts This Page (optional) ▶	96.25
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 23 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DARNELL DAWSON SR		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 3501 WALLACE AVE		Transaction ID: SA11A1.73642
City INDIANAPOLIS	State IN	Zip Code 46218-1660
Amount of Each Receipt this Period 54.00		
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00	

Full Name (Last, First, Middle Initial) B. DAVID DAY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 5666 CRESTVIEW DR		Transaction ID: SA11A1.72147
City FAIRFIELD	State OH	Zip Code 45014-5032
Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

Full Name (Last, First, Middle Initial) C. BETTY DIX		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 309 E HILLSIDE LANE		Transaction ID: SA11A1.72943
City HOLLAND	State OH	Zip Code 43528
Amount of Each Receipt this Period 6.25		
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25	

SUBTOTAL of Receipts This Page (optional) ▶	120.25
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 24 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. CARL DOWELL		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6	
Mailing Address 8512 BROOKSIDE DRIVE W		Transaction ID: SA11A1.72895	
City State Zip Code PEWEE VALLEY KY 40056-9122	Amount of Each Receipt this Period 50.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00		

Full Name (Last, First, Middle Initial) B. ERIC DRAIN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 6018 COLCHESTER		Transaction ID: SA11A1.72575	
City State Zip Code OREGON OH 43616	Amount of Each Receipt this Period 12.50		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50		

Full Name (Last, First, Middle Initial) C. JAMES DUDLEY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 22 FARM VIEW COURT		Transaction ID: SA11A1.73255	
City State Zip Code TOLEDO OH 43615	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer TOLEDO TECHNOLOGIES	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 356.25		

SUBTOTAL of Receipts This Page (optional) ▶	87.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 25 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. M A DURSO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 829 CENTRAL ST		Transaction ID: SA11A1.72561	
City State Zip Code SANDUSKY OH 44870-3204	Amount of Each Receipt this Period 54.00		
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 216.00		

Full Name (Last, First, Middle Initial) B. DENISE ELLIS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 221 MANHATTAN		Transaction ID: SA11A1.72242	
City State Zip Code TOLEDO OH 43608	Amount of Each Receipt this Period 12.50		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50		

Full Name (Last, First, Middle Initial) C. D BRENT ESKRIDGE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 4820 ASHBURY DR		Transaction ID: SA11A1.73364	
City State Zip Code NEW ALBANY IN 47150-6581	Amount of Each Receipt this Period 90.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	156.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 26 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JOE EURESTE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 918 WAYNE AVE		Transaction ID: SA11A1.71513
City State Zip Code DEFIANCE OH 43512-2829	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 60.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. DANIEL L FAIRBANKS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 9526 ASH ST		Transaction ID: SA11A1.73666
City State Zip Code OVERLAND PARK KS 66207-3225	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 210.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1385.00	

Full Name (Last, First, Middle Initial) C. REX FLORENCE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 636 WHITE OAK DR		Transaction ID: SA11A1.71846
City State Zip Code TOLEDO OH 43615	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

SUBTOTAL of Receipts This Page (optional)	▶	295.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 27 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WILLIAM R FOLSOM JR		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 7600 NW 77TH PL		Transaction ID: SA11A1.72775
City State Zip Code KANSAS CITY MO 64152-4220	Amount of Each Receipt this Period 56.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) B. JAMES W FOSTER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 7300 MURKINS RD		Transaction ID: SA11A1.71728
City State Zip Code KANSAS CITY MO 64133-7002	Amount of Each Receipt this Period 140.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 770.00	

Full Name (Last, First, Middle Initial) C. PEGGY A FREEMAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 4835 HANCE LN		Transaction ID: SA11A1.71455
City State Zip Code MOSCOW MILLS MO 63362-1833	Amount of Each Receipt this Period 70.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

SUBTOTAL of Receipts This Page (optional) ▶	266.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 28 / 111
	<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) CHRISTOP GALLAGHER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 15906 RYLAND		Transaction ID: SA11A1.71389
City State Zip Code REDFORD MI 48239-3951	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

B. Full Name (Last, First, Middle Initial) JEFF GALLEGOS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 1228 SCHULTZ ST		Transaction ID: SA11A1.72465
City State Zip Code DEFIANCE OH 43512-2916	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

C. Full Name (Last, First, Middle Initial) EDWARD W GARRISON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 807 MELROSE LN		Transaction ID: SA11A1.73148
City State Zip Code LIBERTY MO 64068-2838	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	220.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 29 / 111
	<input checked="" 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 type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City State Zip Code
GRAND PRAIRIE TX 75051-3447

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 675.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72776

Amount of Each Receipt this Period
200.00

B. Full Name (Last, First, Middle Initial)
RICHARD K GESKE

Mailing Address 6020 S ELAINE AVE

City State Zip Code
CUDAHY WI 53110-2915

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 700.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72246

Amount of Each Receipt this Period
100.00

C. Full Name (Last, First, Middle Initial)
JOSEPH L GOLDEN

Mailing Address 34 NORTHFIELD TER

City State Zip Code
CLIFTON NJ 07013-3916

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

Name of Employer Occupation
FORD MOTOR COMPANY FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 375.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73366

Amount of Each Receipt this Period
25.00

SUBTOTAL of Receipts This Page (optional) ► 325.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 30 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
ROBERT S GORDON

Mailing Address **5208 LITTLE MOUNTAIN RD.**

City **GASTONIA** State **NC** Zip Code **28056-6916**

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

Name of Employer **DAIMLERCHRYSLER** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **245.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 18 / 2006

Transaction ID: SA11A1.73458

Amount of Each Receipt this Period
35.00

B. Full Name (Last, First, Middle Initial)
JOHN GRAINGER

Mailing Address **1716 DUNCAN RD**

City **TOLEDO** State **OH** Zip Code **43613**

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

Name of Employer **LEAR CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 18 / 2006

Transaction ID: SA11A1.71669

Amount of Each Receipt this Period
25.00

C. Full Name (Last, First, Middle Initial)
ROBERT GRANGE

Mailing Address **29280 PROVIDENCE WAY**

City **HAYWARD** State **CA** Zip Code **94544-6412**

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

Name of Employer **NEW UNITED MOTORS MFG** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **210.00**

Date of Receipt
 M M / D D / Y Y Y Y Y
10 / 13 / 2006

Transaction ID: SA11A1.71758

Amount of Each Receipt this Period
30.00

SUBTOTAL of Receipts This Page (optional)	90.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 31 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
FRANCES HALLENBECK

Mailing Address 6540 MARQUETTE

City State Zip Code
ST. LOUIS MO 63139

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.71884

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
DONNA HAMILTON

Mailing Address 1126 W WOODRUFF AVE

City State Zip Code
TOLEDO OH 43606-4854

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

Name of Employer Occupation
LEAR CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 243.75

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73139

Amount of Each Receipt this Period
18.75

C. Full Name (Last, First, Middle Initial)
MICHAEL HARLEY

Mailing Address 1802 N BRENTWOOD LN

City State Zip Code
MUNCIE IN 47304-2510

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72304

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	378.75
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 32 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
EDWARD HARMON

Mailing Address **214 GARNSEY**

City **METAMORA** State **OH** Zip Code **43540**

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

Name of Employer **LEAR CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **250.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2006

Transaction ID: SA11A1.72056

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
ODIE HARRIS

Mailing Address **316 1/2 EAST WEBER**

City **TOLEDO** State **OH** Zip Code **43608**

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

Name of Employer **LEAR CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **243.75**

Date of Receipt
M M / D D / Y Y Y Y
10 / 18 / 2006

Transaction ID: SA11A1.72231

Amount of Each Receipt this Period
18.75

C. Full Name (Last, First, Middle Initial)
FRANCES HAYDEL

Mailing Address **101 MELODY DRIVE**

City **METAIRIE** State **LA** Zip Code **70001**

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

Name of Employer Occupation **RETIRED**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2006

Transaction ID: SA11A1.73767

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional) ► **343.75**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 33 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
STANLEY HERNACKI

Mailing Address 8210 COUNTY ROAD 3

City State Zip Code
SWANTON OH 43558-8695

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

Name of Employer Occupation
TOLEDO TECHNOLOGIES FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 356.25

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72898

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
JERRY W HILL

Mailing Address 6381 N 370 W

City State Zip Code
HUNTINGTON IN 46750-7735

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 340.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71586

Amount of Each Receipt this Period
10.00

C. Full Name (Last, First, Middle Initial)
RUTH HISE

Mailing Address PO BOX 59

City State Zip Code
GREENVILLE TX 75403

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 3000.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.72491

Amount of Each Receipt this Period
3000.00

SUBTOTAL of Receipts This Page (optional)	▶	3035.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 34 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) CATHY HOLLAND		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 426 HAWKINS		Transaction ID: SA11A1.71740
City YPSILANTI	State MI	Zip Code 48197
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer JAC PRODUCTS, INC.	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 237.50	

B. Full Name (Last, First, Middle Initial) JOHN HUBER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 540 PECK RD		Transaction ID: SA11A1.71769
City SPENCERPORT	State NY	Zip Code 14559-9549
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 70.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00	

C. Full Name (Last, First, Middle Initial) ALICIA HUNT		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 5788 LOCUST STREET EXT		Transaction ID: SA11A1.72266
City LOCKPORT	State NY	Zip Code 14094-6504
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 50.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.00	

SUBTOTAL of Receipts This Page (optional) ▶	145.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 35 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
DAVID E HURST

Mailing Address 28 COGNAC DR

City State Zip Code
LAKE SAINT LOUIS MO 63367-1702

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 216.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73908

Amount of Each Receipt this Period
54.00

B. Full Name (Last, First, Middle Initial)
FRANK INMAN

Mailing Address 7095 PECAN HILL DRIVE

City State Zip Code
SOUTHHAVEN MS 38671

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.71551

Amount of Each Receipt this Period
300.00

C. Full Name (Last, First, Middle Initial)
PETRA JAMESON

Mailing Address 10801 CHADSWORTH DR

City State Zip Code
INDIANAPOLIS IN 46236-7323

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73199

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	414.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 36 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) KEN JORDAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address BOX 6197		Transaction ID: SA11A1.73691
City State Zip Code FORT WORTH TX 76115-0197	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer REYNOLDS METAL	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) LARRY D KITSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 1771 County Rd 15		Transaction ID: SA11A1.73231
City State Zip Code Mt Home AZ 72653-6293	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

C. Full Name (Last, First, Middle Initial) JASON KOECHLEY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 2472 KENWOOD-LOWER		Transaction ID: SA11A1.71323
City State Zip Code TOLEDO OH 43606	Amount of Each Receipt this Period 12.50	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25	

SUBTOTAL of Receipts This Page (optional) ▶	612.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 37 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. KAREN K KOVAC		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 1832 N 29TH ST		Transaction ID: SA11A1.73342	
City State Zip Code KANSAS CITY KS 66104-4318		Amount of Each Receipt this Period 56.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) B. JASON K KRZYSIAK		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 55 WELLESLEY DR		Transaction ID: SA11A1.73552	
City State Zip Code PLEASANT RIDGE MI 48069-1242		Amount of Each Receipt this Period 120.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FORD MOTOR COMPANY FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) C. HANK LACAYO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 3403 BEAR CREEK DR		Transaction ID: SA11A1.73344	
City State Zip Code NEWBURY PARK CA 91320		Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation RETIRED			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	476.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 38 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) MICHAEL J LAZETTE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 6 / 2 0 0 6	
Mailing Address 7201 FULTON LUCAS RD		Transaction ID: SA11A1.72512	
City State Zip Code SWANTON OH 43558-8746	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

B. Full Name (Last, First, Middle Initial) TIMOTHY T LEDGERWOOD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 8308 E 91ST ST		Transaction ID: SA11A1.72603	
City State Zip Code KANSAS CITY MO 64138-4347	Amount of Each Receipt this Period 60.00		
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

C. Full Name (Last, First, Middle Initial) FRANK N LEE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 9315 OHIO		Transaction ID: SA11A1.71622	
City State Zip Code DETROIT MI 48204	Amount of Each Receipt this Period 105.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

SUBTOTAL of Receipts This Page (optional) ▶	465.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 39 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. GRACE LIZCANO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 1575 W CENTRAL AVE		Transaction ID: SA11A1.73140	
City State Zip Code TOLEDO OH 43606		Amount of Each Receipt this Period 6.25	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 224.52	

Full Name (Last, First, Middle Initial) B. ANTHONY E LOVELY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 2466 OLD CORNELIA HWY		Transaction ID: SA11A1.72730	
City State Zip Code GAINESVILLE GA 30507-7854		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

Full Name (Last, First, Middle Initial) C. ROBERT C LOWE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 7340 VIRGINIA AVE		Transaction ID: SA11A1.73097	
City State Zip Code KANSAS CITY MO 64131-1741		Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	206.25
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 40 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) ROXANNA LUCAS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 1926 S BUCKEYE ST		Transaction ID: SA11A1.73428
City State Zip Code KOKOMO IN 46902-2153	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 725.00	

B. Full Name (Last, First, Middle Initial) ROXANNA LUCAS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 1926 S BUCKEYE ST		Transaction ID: SA11A1.73429
City State Zip Code KOKOMO IN 46902-2153	Amount of Each Receipt this Period 100.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 825.00	

C. Full Name (Last, First, Middle Initial) KRISTY LUNDBERG		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 5 OAKTREE LN APT K		Transaction ID: SA11A1.71795
City State Zip Code WILLIAMSPORT MD 21795-1242	Amount of Each Receipt this Period 50.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	200.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 41 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RALPH J LYKE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 143 FAY LANE		Transaction ID: SA11A1.73737	
City MINOA	State NY	Zip Code 13116	Amount of Each Receipt this Period 123.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 246.00		

Full Name (Last, First, Middle Initial) B. IAN MACLACHLAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6	
Mailing Address 1626 HAYNES AVE		Transaction ID: SA11A1.73931	
City KOKOMO	State IN	Zip Code 46901-5239	Amount of Each Receipt this Period 7.66
FEC ID number of contributing federal political committee. C			
Name of Employer FEDERAL MOGUL CORP	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 252.78		

Full Name (Last, First, Middle Initial) C. JAMES A MALDONADO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 6728 ALSPAUGH DR.		Transaction ID: SA11A1.72522	
City CASTALIA	State OH	Zip Code 44824	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	250.66
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 42 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DANIEL MALONEY		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 776 STONE RD		Transaction ID: SA11A1.73042	
City ROCHESTER	State NY	Amount of Each Receipt this Period 50.00	
Zip Code 14616-4425			
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 205.00		

Full Name (Last, First, Middle Initial) B. MICHAEL MARTIN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 393 S BRIARCLIFF DR		Transaction ID: SA11A1.73734	
City CANFIELD	State OH	Amount of Each Receipt this Period 50.00	
Zip Code 44406-1016			
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. RANDY A MARTIN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 3205 ASBURY CT.		Transaction ID: SA11A1.71335	
City KOKOMO	State IN	Amount of Each Receipt this Period 20.00	
Zip Code 46902			
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 280.00		

SUBTOTAL of Receipts This Page (optional) ▶	120.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 43 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
HEATHER MARTINEZ

Mailing Address 26 NEVADA ST

City TOLEDO State OH Zip Code 43605

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.25

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73563

Amount of Each Receipt this Period
25.00

B. Full Name (Last, First, Middle Initial)
DANIEL J MASCHGER

Mailing Address 219 N E EASTRIDGE STREE

City LEES SUMMIT State MO Zip Code 64063

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 256.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73545

Amount of Each Receipt this Period
64.00

C. Full Name (Last, First, Middle Initial)
PERRY MASON

Mailing Address 9067 DUNN RD APT 118

City HAZELWOOD State MO Zip Code 63042-2005

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 1200.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72309

Amount of Each Receipt this Period
200.00

SUBTOTAL of Receipts This Page (optional) ► 289.00

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

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 44 / 111
	<input checked="" 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 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DAN MAYNARD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 10 MIRIVAL LANE		Transaction ID: SA11A1.72649
City State Zip Code DEFIANCE OH 43512	Amount of Each Receipt this Period 80.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

Full Name (Last, First, Middle Initial) B. CHRISTOPHER MCCLAIN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 317 OLD IRONDALE RD		Transaction ID: SA11A1.72516
City State Zip Code BISMARCK MO 63624-9655	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. JAMES R MCCULLOH		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 313 BONNIE LN		Transaction ID: SA11A1.72260
City State Zip Code LIBERTY MO 64068-9395	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	230.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 45 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
RICHARD W MCDANIEL

Mailing Address **1030 BOYNTON DR**

City **LANSING** State **MI** Zip Code **48917-1760**

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

Name of Employer **GENERAL MOTORS CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.72650

Amount of Each Receipt this Period
60.00

B. Full Name (Last, First, Middle Initial)
WESLEY S MC LAUGHLIN

Mailing Address **2212 N. 250 E. LOT # 18**

City **KOKOMO** State **IN** Zip Code **46901**

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

Name of Employer **DAIMLERCHRYSLER** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.73535

Amount of Each Receipt this Period
150.00

C. Full Name (Last, First, Middle Initial)
CHRIS MCTAGGART

Mailing Address **8054 W DIVISION RD**

City **TIPTON** State **IN** Zip Code **46072-8790**

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

Name of Employer **GENERAL MOTORS CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **240.00**

Date of Receipt
M M / D D / Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.72032

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	270.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 46 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JOHN MEEKER		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 222 SOMERSET		Transaction ID: SA11A1.71858
City TOLEDO	State OH	Zip Code 43609
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. BERNICE H MILESKI		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 4120 SOTOL DRIVE		Transaction ID: SA11A1.73551
City LAS CRUCES	State NM	Zip Code 88011-7641
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	

Full Name (Last, First, Middle Initial) C. RAYMOND M MILLER II		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 2381 ALTA WEST RD		Transaction ID: SA11A1.73300
City MANSFIELD	State OH	Zip Code 44903-8230
FEC ID number of contributing federal political committee.	C	Amount of Each Receipt this Period 80.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 320.00	

SUBTOTAL of Receipts This Page (optional)	▶	1105.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 47 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) KENNETH W MORRIS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 909 REDWOOD CT		Transaction ID: SA11A1.73525
City LIBERTY	State MO	Zip Code 64068-9206
Amount of Each Receipt this Period 150.00		
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

B. Full Name (Last, First, Middle Initial) PETER M MURPHY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 18 OSWEGO AVE		Transaction ID: SA11A1.72419
City OAKLAND	State NJ	Zip Code 07436-2922
Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 425.00	

C. Full Name (Last, First, Middle Initial) DAVID J MYERS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 200 WOODDALE AVE		Transaction ID: SA11A1.72928
City NEW CASTLE	State DE	Zip Code 19720-4736
Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00	

SUBTOTAL of Receipts This Page (optional) ▶	252.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	PAGE 48 / 111
	(check only one)	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. STEVEN MYERS		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 9460 SYLVANIA-PETERSBURG RD		Transaction ID: SA11A1.73133
City OTTAWA LAKE State MI Zip Code 49267	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 18.75
Name of Employer LEAR CORPORATION Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75

Full Name (Last, First, Middle Initial) B. EDWARD M NANNO		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 4786 MAKYES RD.		Transaction ID: SA11A1.72877
City SYRACUSE State NY Zip Code 13215	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 200.00
Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 350.00

Full Name (Last, First, Middle Initial) C. RICK NEIL		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address PO BOX 470794		Transaction ID: SA11A1.72113
City TULSA State OK Zip Code 74147-0794	FEC ID number of contributing federal political committee. C	Amount of Each Receipt this Period 120.00
Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00

SUBTOTAL of Receipts This Page (optional)	338.75
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 49 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ALISHA NINO		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1800 N MC CORD RD N #150		Transaction ID: SA11A1.71324
City TOLEDO	State OH	Zip Code 43615
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 18.75
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.77	

Full Name (Last, First, Middle Initial) B. MONICA NINO		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1807 BROWNSTONE BLVD APT 403		Transaction ID: SA11A1.72583
City TOLEDO	State OH	Zip Code 43614
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.25	

Full Name (Last, First, Middle Initial) C. MARLENE OVERTON		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 1756 FREEMAN ST		Transaction ID: SA11A1.73629
City TOLEDO	State OH	Zip Code 43606-4445
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer JAC PRODUCTS, INC.	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75	

SUBTOTAL of Receipts This Page (optional)	▶	68.75
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 50 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) ROBERT H OWENS, JR. Mailing Address 309 TEAKWOOD DR City State Zip Code MONROE LA 71203-2248 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 1 / 2 0 0 6 Transaction ID: SA11A1.71666 Amount of Each Receipt this Period 30.00
Name of Employer Occupation GENERAL MOTORS CORPORATION FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 210.00		

B. Full Name (Last, First, Middle Initial) LILLIE PACK Mailing Address 1302 WAVERLY City State Zip Code TOLEDO OH 43607 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.72039 Amount of Each Receipt this Period 25.00
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 256.25		

C. Full Name (Last, First, Middle Initial) JOSEPH PALENCAR Mailing Address 141 LAVERNE DR City State Zip Code AUGUSTA WV 26704-4002 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6 Transaction ID: SA11A1.73380 Amount of Each Receipt this Period 3.00
Name of Employer Occupation FORD MOTOR COMPANY FACTORY WORKER Receipt For: Aggregate Year-to-Date ▼ <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ 296.00		

SUBTOTAL of Receipts This Page (optional)	58.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 51 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
TIMOTHY O PARKER

Mailing Address 1221 WAYNE ST

City SANDUSKY State OH Zip Code 44870-3530

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 320.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.71726

Amount of Each Receipt this Period
120.00

B. Full Name (Last, First, Middle Initial)
DAWN PAUKEN

Mailing Address 866 ATLANTIC AVE

City TOLEDO State OH Zip Code 43609

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

Name of Employer LEAR CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 218.75

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73131

Amount of Each Receipt this Period
6.25

C. Full Name (Last, First, Middle Initial)
FRANCIS PERRY

Mailing Address 312 ROUTE 131

City MASSENA State NY Zip Code 13662

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72159

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	186.25
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 52 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DANNY R PHILLIPS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 6720 WINDFALL RD		Transaction ID: SA11A1.72835	
City State Zip Code GALION OH 44833-8950	Amount of Each Receipt this Period 2.00		
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 332.00		

Full Name (Last, First, Middle Initial) B. LORETTA POELLNITZ		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 631 LUCAS		Transaction ID: SA11A1.72742	
City State Zip Code TOLEDO OH 43602	Amount of Each Receipt this Period 25.00		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 256.25		

Full Name (Last, First, Middle Initial) C. KEN POMA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address 14 MISHEMOKWA DR		Transaction ID: SA11A1.73077	
City State Zip Code CHEROKEE VILLAGE AR 72559	Amount of Each Receipt this Period 300.00		
FEC ID number of contributing federal political committee. C			
Name of Employer	Occupation RETIRED		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	327.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 53 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
JAMES POSEY

Mailing Address 6903 N WALNUT

City State Zip Code
GLADSTONE MO 64118-2516

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.71637

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
FELTON POWELL

Mailing Address PO BOX 11064

City State Zip Code
OKLAHOMA CITY OK 73136-0064

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 272.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71800

Amount of Each Receipt this Period
68.00

C. Full Name (Last, First, Middle Initial)
SCOTT PROPER

Mailing Address 36 CORNELL AVE

City State Zip Code
MASSENA NY 13662-1422

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72525

Amount of Each Receipt this Period
60.00

SUBTOTAL of Receipts This Page (optional)	▶	428.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 54 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. VICTOR H PUFONT		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 11128 82ND STREET		Transaction ID: SA11A1.72762	
City State Zip Code PLEASANT PRAIRIE WI 53158	Amount of Each Receipt this Period 120.00		
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

Full Name (Last, First, Middle Initial) B. LANA R PUTERBAUGH		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 2880 S 1100 E		Transaction ID: SA11A1.72076	
City State Zip Code PERU IN 46970	Amount of Each Receipt this Period 100.00		
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00		

Full Name (Last, First, Middle Initial) C. ANTHONY R RAINEY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6	
Mailing Address 3927 N 58TH ST.		Transaction ID: SA11A1.73128	
City State Zip Code MILWAUKEE WI 53216-2230	Amount of Each Receipt this Period 8.50		
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 263.50		

SUBTOTAL of Receipts This Page (optional) ▶	228.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 55 / 111
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ANTHONY R RAINEY		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 3927 N 58TH ST.		Transaction ID: SA11A1.72404	
City MILWAUKEE	State WI	Zip Code 53216-2230	Amount of Each Receipt this Period 8.50
FEC ID number of contributing federal political committee. C			
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.00		

Full Name (Last, First, Middle Initial) B. DAVID RALSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 506 MARKET ST NE		Transaction ID: SA11A1.71815	
City DECATUR	State AL	Zip Code 35601-1977	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 230.00		

Full Name (Last, First, Middle Initial) C. R NICK REID		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 1393 HUNTERS LN		Transaction ID: SA11A1.72871	
City SIMPSONVILLE	State KY	Zip Code 40067-6482	Amount of Each Receipt this Period 90.00
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	158.50
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 56 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. MARGARET REYNOLDS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6	
Mailing Address HC 2 BOX 114 A		Transaction ID: SA11A1.73103	
City WILLIAMSVILLE	State MO	Zip Code 63967	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation RETIRED	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) B. MICHAEL L RICHMOND		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 110 LEONARD DR		Transaction ID: SA11A1.73728	
City EAST SAINT LOUIS	State IL	Zip Code 62206-2423	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) C. GIRARD ROBERSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 7925 N FLINTLOCK RD APT I		Transaction ID: SA11A1.72600	
City KANSAS CITY	State MO	Zip Code 64158-1136	Amount of Each Receipt this Period 90.00
FEC ID number of contributing federal political committee. C			
Name of Employer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	450.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 57 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JANNETTE ROBERTS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6
Mailing Address 1360 SCHAEFFER ROAD		Transaction ID: SA11A1.72234
City NORWALK	State OH	Zip Code 44857-9790
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.00
Name of Employer VACATIONLAND FEDERAL CR UN	Occupation TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. SAM ROBERTS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 15 SMITH RD		Transaction ID: SA11A1.73839
City MASSENA	State NY	Zip Code 13662
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 56.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00	

Full Name (Last, First, Middle Initial) C. GEORGE E ROBERTSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 1557 E SYLVIA ST		Transaction ID: SA11A1.72534
City OLATHE	State KS	Zip Code 66061-3030
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	146.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 58 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WES ROBINSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 15248 S 337TH EAST AVE		Transaction ID: SA11A1.73253	
City State Zip Code PORTER OK 74454-5764		Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation FORD MOTOR COMPANY FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

Full Name (Last, First, Middle Initial) B. WILLIE D ROBINSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 6919 N. SUMMERFIELD DR.		Transaction ID: SA11A1.71749	
City State Zip Code INDIANAPOLIS IN 46214		Amount of Each Receipt this Period 150.00	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation DAIMLERCHRYSLER FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. ROBERT ROHRS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 147 JENNINGS		Transaction ID: SA11A1.72405	
City State Zip Code ROSSFORD OH 43460		Amount of Each Receipt this Period 18.75	
FEC ID number of contributing federal political committee. C			
Name of Employer Occupation LEAR CORPORATION FACTORY WORKER			
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 243.75	

SUBTOTAL of Receipts This Page (optional) ▶	258.75
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 59 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) ROBERT ROSE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address PO BOX 140511		Transaction ID: SA11A1.72683
City TOLEDO State OH Zip Code 43614-0809	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer TOLEDO TECHNOLOGIES Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

B. Full Name (Last, First, Middle Initial) FRED ROYAL, JR.		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 5705 W NASH ST		Transaction ID: SA11A1.71314
City MILWAUKEE State WI Zip Code 53216-2858	Amount of Each Receipt this Period 90.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 640.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

C. Full Name (Last, First, Middle Initial) BAILEY J RUSSELL		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 35 B NORTH EAST ISLES		Transaction ID: SA11A1.72263
City NORTH EAST State MD Zip Code 21901	Amount of Each Receipt this Period 15.00	
FEC ID number of contributing federal political committee. C		
Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER	Aggregate Year-to-Date ▼ 350.00	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional) ▶	130.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 60 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WANDA S SALVATELLI		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 4 GARVEY LANE		Transaction ID: SA11A1.71784	
City NEWARK	State DE	Zip Code 19702	Amount of Each Receipt this Period 75.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 275.00		

Full Name (Last, First, Middle Initial) B. FELIPE E SANCHEZ		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 3 / 2 0 0 6	
Mailing Address 721 GLENCREEK DR.		Transaction ID: SA11A1.72087	
City TRACY	State CA	Zip Code 95377-8224	Amount of Each Receipt this Period 30.00
FEC ID number of contributing federal political committee. C			
Name of Employer NEW UNITED MOTORS MFG	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00		

Full Name (Last, First, Middle Initial) C. TIMOTHY R SANFORD		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 11782 FORREST PARK LANE		Transaction ID: SA11A1.71437	
City VICTORVILLE	State CA	Zip Code 92392	Amount of Each Receipt this Period 150.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00		

SUBTOTAL of Receipts This Page (optional) ▶	255.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 61 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. BRADLEY R SCHWANDA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 2009 E FOREST HILL AVENUE		Transaction ID: SA11A1.73132
City State Zip Code OAK CREEK WI 53154-3123	Amount of Each Receipt this Period 8.75	
FEC ID number of contributing federal political committee. C		
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 262.50	

Full Name (Last, First, Middle Initial) B. BRADLEY R SCHWANDA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 2009 E FOREST HILL AVENUE		Transaction ID: SA11A1.72745
City State Zip Code OAK CREEK WI 53154-3123	Amount of Each Receipt this Period 8.75	
FEC ID number of contributing federal political committee. C		
Name of Employer AMERICAN BRANDS	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 271.25	

Full Name (Last, First, Middle Initial) C. JOHN SCOTT		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 2250 N. C.R. 1250 E.		Transaction ID: SA11A1.72717
City State Zip Code FRANKFORT IN 46041	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional) ▶	317.50
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 62 / 111
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 15	<input type="checkbox"/> 12
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
STANLEY W SEABERT

Mailing Address 14 E ELM ST

City State Zip Code
FOREST OH 45843

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

Name of Employer OCCIDENTAL PETROLEUM CORP
Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
225.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 13 / 2006

Transaction ID: SA11A1.73805

Amount of Each Receipt this Period
100.00

B. Full Name (Last, First, Middle Initial)
TERRY L SELL

Mailing Address 1558 OAKDALE DR.

City State Zip Code
POTTSTOWN PA 19464-2758

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

Name of Employer DANA CORPORATION
Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
210.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 17 / 2006

Transaction ID: SA11A1.72057

Amount of Each Receipt this Period
28.00

C. Full Name (Last, First, Middle Initial)
SANTOS SERMENO

Mailing Address PO BOX 310

City State Zip Code
BLACK ROCK AR 72415-0310

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

Name of Employer
Occupation RETIRED

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
300.00

Date of Receipt
M M / D D / Y Y Y Y
10 / 12 / 2006

Transaction ID: SA11A1.73936

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	428.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 63 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) DANIEL P SHANAHAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 1457 DANGELO DR		Transaction ID: SA11A1.72110	
City NORTH TONAWANDA	State NY	Zip Code 14120-3071	Amount of Each Receipt this Period 195.00
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 775.00		

B. Full Name (Last, First, Middle Initial) A J SHUMATE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 144 LINDA LN		Transaction ID: SA11A1.71428	
City BOWLING GREEN	State KY	Zip Code 42101	Amount of Each Receipt this Period 60.00
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

C. Full Name (Last, First, Middle Initial) LISA M SHUREB		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 4744 CUTTLE ROAD		Transaction ID: SA11A1.73527	
City ST. CLAIR	State MI	Zip Code 48079	Amount of Each Receipt this Period 120.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00		

SUBTOTAL of Receipts This Page (optional) ▶	375.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 64 / 111
	<input checked="" 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 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) PAUL SIEJAK		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 6259 HAMM RD		Transaction ID: SA11A1.72832
City State Zip Code LOCKPORT NY 14094-6403	Amount of Each Receipt this Period 20.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

B. Full Name (Last, First, Middle Initial) JAMES SILVESTRO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address PO BOX 755		Transaction ID: SA11A1.73670
City State Zip Code LODI NJ 07644-0755	Amount of Each Receipt this Period 75.00	
FEC ID number of contributing federal political committee. C		
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

C. Full Name (Last, First, Middle Initial) KATHY SLUSHER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 9 / 2 0 0 6
Mailing Address 5100 TIFFIN AVENUE		Transaction ID: SA11A1.71318
City State Zip Code CASTALIA OH 44824-9431	Amount of Each Receipt this Period 30.00	
FEC ID number of contributing federal political committee. C		
Name of Employer VACATIONLAND FEDERAL CR UN	Occupation TECHNICIAN	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	125.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 65 / 111
	<input checked="" 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 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
LEONARD E SMIGIELSKI

Mailing Address **1178 HERBERT J AVE**

City **JACKSON** State **MI** Zip Code **49202-1928**

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

Name of Employer **GENERAL MOTORS CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **235.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.71459

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
ANDREW SMITH

Mailing Address **4800 DEEPHOLLOW DR**

City **COLUMBUS** State **OH** Zip Code **43228-2714**

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

Name of Employer **GENERAL MOTORS CORPORATION** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **213.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.73577

Amount of Each Receipt this Period
33.00

C. Full Name (Last, First, Middle Initial)
THOMAS R SMITH

Mailing Address **13-D-4 CAPANO DRIVE**

City **NEWARK** State **DE** Zip Code **19702**

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

Name of Employer **DAIMLERCHRYSLER** Occupation **FACTORY WORKER**

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ **309.00**

Date of Receipt
M M / D D / Y Y Y Y Y
10 / 05 / 2006

Transaction ID: SA11A1.72117

Amount of Each Receipt this Period
3.00

SUBTOTAL of Receipts This Page (optional)	106.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 66 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ARTHUR S SNOW		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 398 W APPLE ALY		Transaction ID: SA11A1.72798
City MOORESVILLE	State IN	Zip Code 46158-6918
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 72.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00	

Full Name (Last, First, Middle Initial) B. FRANCO SOCORRO		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 12723 GABBETT DR		Transaction ID: SA11A1.72840
City LA MIRANDA	State CA	Zip Code 90638
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 300.00
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

Full Name (Last, First, Middle Initial) C. SALLY M SOWARDS		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 218 GOLDA LANE		Transaction ID: SA11A1.73151
City FENTON	State MO	Zip Code 63026
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 105.00
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

SUBTOTAL of Receipts This Page (optional) ▶	477.00
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 67 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. JIMMIE SPATES		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 5305 NORTHFIELD RD APT 106		Transaction ID: SA11A1.71882
City BEDFORD HEIGHTS	State OH	Zip Code 44146
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 25.00
Name of Employer ALCOA INC.	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

Full Name (Last, First, Middle Initial) B. JACQUILIA STANTON		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 283 N PRAIRIE RD		Transaction ID: SA11A1.71929
City WARRENTON	State MO	Zip Code 63383-4335
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 84.00
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	

Full Name (Last, First, Middle Initial) C. DAVID L STAUCH		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 2665 LEWISBERRY RD		Transaction ID: SA11A1.71932
City YORK	State PA	Zip Code 17404-1345
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 60.00
Name of Employer YORK INTERNATIONAL CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

SUBTOTAL of Receipts This Page (optional)	▶	169.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 68 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
MARK A STONER

Mailing Address 2415 ROSS STREET

City NORTHWOOD State OH Zip Code 43619-1417

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

Name of Employer DAIMLERCHRYSLER Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.71493

Amount of Each Receipt this Period
15.00

B. Full Name (Last, First, Middle Initial)
JIMMY D STOUFER SR

Mailing Address 315 E LONGFELLOW ST

City KANSAS CITY State MO Zip Code 64119-1728

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

Name of Employer FORD MOTOR COMPANY Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 825.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 8 / 2 0 0 6

Transaction ID: SA11A1.73179

Amount of Each Receipt this Period
225.00

C. Full Name (Last, First, Middle Initial)
M M STUBBLEFIELD

Mailing Address 345 FLORAWOOD ST

City WATERFORD State MI Zip Code 48327-2432

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

Name of Employer GENERAL MOTORS CORPORATION Occupation FACTORY WORKER

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72289

Amount of Each Receipt this Period
40.00

SUBTOTAL of Receipts This Page (optional)	▶	280.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 69 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. GARY C STYLE		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 389 WESTBROOK DR		Transaction ID: SA11A1.71404	
City O FALLON	State MO	Zip Code 63366-2464	Amount of Each Receipt this Period 56.00
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 224.00		

Full Name (Last, First, Middle Initial) B. LARRY W SWAIN		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 595 CHISWICK PL		Transaction ID: SA11A1.72377	
City GALION	State OH	Zip Code 44833-1058	Amount of Each Receipt this Period 52.00
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

Full Name (Last, First, Middle Initial) C. CHRISTOPHERJ SZABO		Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 4523 NEWBERRY ST		Transaction ID: SA11A1.73803	
City WAYNE	State MI	Zip Code 48184-2171	Amount of Each Receipt this Period 450.00
FEC ID number of contributing federal political committee. C			
Name of Employer FORD MOTOR COMPANY	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 1500.00		

SUBTOTAL of Receipts This Page (optional) ▶	558.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 70 / 111
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) CARLYN TATE		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 12750 CENTRALIA ST #84		Transaction ID: SA11A1.73101
City State Zip Code LAKEWOD CA 90715	Amount of Each Receipt this Period 300.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS COMPANY	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

B. Full Name (Last, First, Middle Initial) TANYA TAYLOR		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6
Mailing Address 538 NEBRASKA		Transaction ID: SA11A1.72944
City State Zip Code TOLEDO OH 43602	Amount of Each Receipt this Period 25.00	
FEC ID number of contributing federal political committee. C		
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75	

C. Full Name (Last, First, Middle Initial) RISA THOMPSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 363 HERITAGE AVE		Transaction ID: SA11A1.71652
City State Zip Code BOWLING GREEN KY 42104-0329	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional) ▶	385.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 71 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ROBERT L THOMPSON		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 4313 N ROSEWOOD AVE		Transaction ID: SA11A1.72322	
City State Zip Code MUNCIE IN 47304-1578	Amount of Each Receipt this Period 11.54		
FEC ID number of contributing federal political committee. C			
Name of Employer NEW VENTURE GEAR	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 277.16		

Full Name (Last, First, Middle Initial) B. KIRK TINER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 5104 RIDGE POINTE DR		Transaction ID: SA11A1.72861	
City State Zip Code ARLINGTON TX 76017-1958	Amount of Each Receipt this Period 52.00		
FEC ID number of contributing federal political committee. C			
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 208.00		

Full Name (Last, First, Middle Initial) C. JONATHON TOEPFER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 819 GLENWOOD RD APT 8		Transaction ID: SA11A1.72577	
City State Zip Code ROSSFORD OH 43460	Amount of Each Receipt this Period 18.75		
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.25		

SUBTOTAL of Receipts This Page (optional) ▶	82.29
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 72 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. VESTER TRIPLETT JR		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 124 W 24TH ST		Transaction ID: SA11A1.72444	
City WILMINGTON	State DE	Zip Code 19802	Amount of Each Receipt this Period 3.00
FEC ID number of contributing federal political committee. C			
Name of Employer DAIMLERCHRYSLER	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 310.00		

Full Name (Last, First, Middle Initial) B. DWIGHT TROESKEN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 8 / 2 0 0 6	
Mailing Address 851 CLARK STREET		Transaction ID: SA11A1.71496	
City TOLEDO	State OH	Zip Code 43605	Amount of Each Receipt this Period 18.75
FEC ID number of contributing federal political committee. C			
Name of Employer LEAR CORPORATION	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 243.75		

Full Name (Last, First, Middle Initial) C. MARK TROMBLA		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6	
Mailing Address 7839 DORR ST		Transaction ID: SA11A1.72420	
City TOLEDO	State OH	Zip Code 43617-1722	Amount of Each Receipt this Period 25.00
FEC ID number of contributing federal political committee. C			
Name of Employer TOLEDO TECHNOLOGIES	Occupation FACTORY WORKER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 368.75		

SUBTOTAL of Receipts This Page (optional) ▶	46.75
TOTAL This Period (last page this line number only) ▶	[]

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 73 / 111
	<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial) BRENDA UPCHURCH		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 0 6
Mailing Address 4040 N 267		Transaction ID: SA11A1.72337
City State Zip Code BROWNSBURG IN 46112-9708	Amount of Each Receipt this Period 170.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 470.00	

B. Full Name (Last, First, Middle Initial) MIKE UPLINGER		Date of Receipt M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 43 AUBURN ST		Transaction ID: SA11A1.73578
City State Zip Code SHELBY OH 44875	Amount of Each Receipt this Period 60.00	
FEC ID number of contributing federal political committee. C		
Name of Employer GENERAL MOTORS CORPORATION	Occupation FACTORY WORKER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 240.00	

C. Full Name (Last, First, Middle Initial) CECIL VAUGHAN		Date of Receipt M M / D D / Y Y Y Y 1 0 / 1 2 / 2 0 0 6
Mailing Address 411 N. DELAWARE		Transaction ID: SA11A1.71957
City State Zip Code INDEPENDENCE MO 64050	Amount of Each Receipt this Period 400.00	
FEC ID number of contributing federal political committee. C		
Name of Employer	Occupation RETIRED	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

SUBTOTAL of Receipts This Page (optional) ▶	630.00
TOTAL This Period (last page this line number only) ▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 74 / 111
	<input checked="" 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 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
EDMUND WIANECKI

Mailing Address 1056 INDIANA CT.

City State Zip Code
VENICE CA 90291

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

Name of Employer Occupation
RETIREED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.73692

Amount of Each Receipt this Period
300.00

B. Full Name (Last, First, Middle Initial)
JAMES R WILDE

Mailing Address 14726 ST. RT. 111

City State Zip Code
DEFIANCE OH 43512

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

Name of Employer Occupation
DEFIANCE PRECISION PRODUCTS FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 1 6 / 2 0 0 6

Transaction ID: SA11A1.72417

Amount of Each Receipt this Period
24.00

C. Full Name (Last, First, Middle Initial)
C H WISE JR

Mailing Address 435 SOUTHMOOR CIR

City State Zip Code
STOCKBRIDGE GA 30281-4973

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt
M M / D D / Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.73818

Amount of Each Receipt this Period
100.00

SUBTOTAL of Receipts This Page (optional)	▶	424.00
TOTAL This Period (last page this line number only)	▶	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 75 / 111
	(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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

A. Full Name (Last, First, Middle Initial)
RICK L WITT

Mailing Address 3010 CHIEF TURTLE CT

City State Zip Code
HUNTINGTON IN 46750-4127

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72381

Amount of Each Receipt this Period
70.00

B. Full Name (Last, First, Middle Initial)
ANNIE WOODS

Mailing Address 450 N PRESTON ST

City State Zip Code
WOLFE CITY TX 75496-2182

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

Name of Employer Occupation
GENERAL MOTORS CORPORATION FACTORY WORKER

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 210.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 0 5 / 2 0 0 6

Transaction ID: SA11A1.72890

Amount of Each Receipt this Period
54.00

C. Full Name (Last, First, Middle Initial)
KENNETH WORLEY

Mailing Address 10337 AIKINSVILLE RD.

City State Zip Code
FORTUNA MO 65034

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

Name of Employer Occupation
RETIRED

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt
M M / D D / Y Y Y Y Y
1 0 / 1 2 / 2 0 0 6

Transaction ID: SA11A1.71351

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	424.00
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 76 / 111
(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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)
A. ANDREW ZIEMKIEWICZ

Mailing Address 3152 WALDMAR ROAD

City	State	Zip Code
TOLEDO	OH	43615

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

Name of Employer
JOHNSON CONTROLS INC

Occupation
FACTORY WORKER

Receipt For:

Primary General

Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0	/	1	6	/	2	0	0	6

Transaction ID: SA11A1.72679

Amount of Each Receipt this Period
300.00

SUBTOTAL of Receipts This Page (optional)	▶	300.00
TOTAL This Period (last page this line number only)	▶	24435.95

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. CLARENCE H. JOHNSON, P.C.		Transaction ID: SB21B.71189 Date of Disbursement 10 / 05 / 2006
Mailing Address P O BOX 427 26212 WOODWARD AVENUE		Amount of Each Disbursement this Period 4138.75
City ROYAL OAK State MI Zip Code 48068-0427	Purpose of Disbursement V-CAP AUDIT, TAX PREP 05, MISC	
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) ▼	

Full Name (Last, First, Middle Initial) B. THE MCLAUGHLIN COMPANY		Transaction ID: SB21B.71187 Date of Disbursement 10 / 05 / 2006
Mailing Address 1725 DESALES ST. NW		Amount of Each Disbursement this Period 10.00
City WASHINGTON State DC Zip Code 20036	Purpose of Disbursement INV#36060 CAP CNCL POLICY CHNG	
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) ▼	

Full Name (Last, First, Middle Initial) C. VIZUAL EXPRESS		Transaction ID: SB21B.71186 Date of Disbursement 10 / 04 / 2006
Mailing Address 440 E. CENTER STREET		Amount of Each Disbursement this Period 5908.36
City MARION State OH Zip Code 43302	Purpose of Disbursement INV #6356 R2B V-CAP RINGS	
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) ▶	10057.11
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 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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. VIZUAL EXPRESS		Transaction ID: SB21B.73937
Mailing Address 440 E. CENTER STREET		Date of Disbursement 10 / 04 / 2006
City MARION	State OH	Zip Code 43302
Purpose of Disbursement voided ck #1840 dtd 09/08/06		Amount of Each Disbursement this Period -5098.36
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) B. VIZUAL EXPRESS		Transaction ID: SB21B.71190
Mailing Address 440 E. CENTER STREET		Date of Disbursement 10 / 17 / 2006
City MARION	State OH	Zip Code 43302
Purpose of Disbursement #006140-1 R2B V-CAP WINDSHIRTS		Amount of Each Disbursement this Period 1008.09
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

Full Name (Last, First, Middle Initial) C. VIZUAL EXPRESS		Transaction ID: SB21B.71191
Mailing Address 440 E. CENTER STREET		Date of Disbursement 10 / 17 / 2006
City MARION	State OH	Zip Code 43302
Purpose of Disbursement #006140 R2B V-CAP WINDSHIRTS		Amount of Each Disbursement this Period 2383.96
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/ Type	

SUBTOTAL of Disbursements This Page (optional)	-1706.31
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 79 / 111

<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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. WILSON TROPHY COMPANY

Mailing Address 1724 FRIENZA AVE.

City State Zip Code
SACRAMENTO CA 95815

Purpose of Disbursement
INV #A04-5122, R5 V-CAP PINS

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.71188

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

3719.78

SUBTOTAL of Disbursements This Page (optional)

3719.78

TOTAL This Period (last page this line number only)

12070.58

**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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ABERCROMBIE FOR CONGRESS		Transaction ID: SB23.71215 Date of Disbursement																					
Mailing Address 2469 SOUTH KING 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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	6														
City HONOLULU	State HI	Zip Code 96826	Amount of Each Disbursement this Period																				
Purpose of Disbursement NEIL ABERCROMBIE		Category/ Type	2000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: HI	District: 1																						

Full Name (Last, First, Middle Initial) B. AKAKA IN 2006		Transaction ID: SB23.71214 Date of Disbursement																					
Mailing Address 301 4TH STREET, NE, 2ND FLOOR		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City WASHINGTON	State DC	Zip Code 20002	Amount of Each Disbursement this Period																				
Purpose of Disbursement DANIEL K AKAKA		Category/ Type	3000.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: HI	District:																						

Full Name (Last, First, Middle Initial) C. A LOT OF PEOPLE FOR DAVE OBEY		Transaction ID: SB23.71296 Date of Disbursement																					
Mailing Address P.O. BOX 75214		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City WASHINGTON	State DC	Zip Code 20013-5214	Amount of Each Disbursement this Period																				
Purpose of Disbursement DAVID OBEY		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WI	District: 7																						

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. AL WEED 2004		Transaction ID: SB23.71288 Date of Disbursement 10 / 10 / 2006
Mailing Address PO BOX 608		Amount of Each Disbursement this Period 1000.00
City LOVINGSTON	State VA	
Zip Code 22949	Purpose of Disbursement AL WEED	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 05		

Full Name (Last, First, Middle Initial) B. ANDREW DUCK FOR CONGRESS		Transaction ID: SB23.71229 Date of Disbursement 10 / 10 / 2006
Mailing Address PO BOX 462		Amount of Each Disbursement this Period 2000.00
City MYERSVILLE	State MD	
Zip Code 21773	Purpose of Disbursement ANDREW DUCK	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MD District: 6		

Full Name (Last, First, Middle Initial) C. ANDREWS FOR CONGRESS		Transaction ID: SB23.71251 Date of Disbursement 10 / 05 / 2006
Mailing Address 523 RICHEY AVENUE		Amount of Each Disbursement this Period 3500.00
City COLLINGSWOOD	State NJ	
Zip Code 08108	Purpose of Disbursement ROBERT ANDREWS	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 01		

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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. ARCURI FOR CONGRESS		Transaction ID: SB23.71266	
Mailing Address PO BOX 8508		Date of Disbursement 10 / 17 / 2006	
City UTICA	State NY	Zip Code 13505	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement MICHAEL ARCURI		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY	District: 24		

Full Name (Last, First, Middle Initial) B. BEN CARDIN FOR SENATE		Transaction ID: SB23.71226	
Mailing Address PO BOX 65056		Date of Disbursement 10 / 05 / 2006	
City BALTIMORE	State MD	Zip Code 21209	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement BENJAMIN CARDIN		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MD	District:		

Full Name (Last, First, Middle Initial) C. BEN CARDIN FOR SENATE		Transaction ID: SB23.71227	
Mailing Address PO BOX 65056		Date of Disbursement 10 / 05 / 2006	
City BALTIMORE	State MD	Zip Code 21209	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement BENJAMIN CARDIN		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: MD	District:		

SUBTOTAL of Disbursements This Page (optional)	7000.00
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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. BETTY MCCOLLUM FOR CONGRESS		Transaction ID: SB23.71243
Mailing Address PO BOX 14131		Date of Disbursement 10 / 10 / 2006
City ST PAUL	State MN	Zip Code 55114-0131
Purpose of Disbursement BETTY MCCOLLUM	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 4		

Full Name (Last, First, Middle Initial) B. BOBBY SCOTT FOR CONGRESS		Transaction ID: SB23.71285
Mailing Address PO BOX 251		Date of Disbursement 10 / 10 / 2006
City NEWPORT NEWS	State VA	Zip Code 23607
Purpose of Disbursement ROBERT C SCOTT	Amount of Each Disbursement this Period 2000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: VA District: 3		

Full Name (Last, First, Middle Initial) C. BOB CASEY FOR PENNSYLVANIA COMMITTEE		Transaction ID: SB23.71280
Mailing Address P.O. BOX 1177		Date of Disbursement 10 / 05 / 2006
City HARRISBURG	State PA	Zip Code 17108-1177
Purpose of Disbursement BOB CASEY	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District:		

SUBTOTAL of Disbursements This Page (optional)	12000.00
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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. BUTTERFIELD FOR CONGRESS COMMITTEE		Transaction ID: SB23.71246
Mailing Address 800 W. HINES STREET		Date of Disbursement 10 / 10 / 2006
City WILSON	State NC	Zip Code 27893
Purpose of Disbursement G K. BUTTERFIELD	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NC District: 1		

Full Name (Last, First, Middle Initial) B. CAMPAIGN TO ELECT JIM MARSHALL		Transaction ID: SB23.71212
Mailing Address PO BOX 125		Date of Disbursement 10 / 05 / 2006
City MACON	State GA	Zip Code 31202
Purpose of Disbursement JIM MARSHALL	Amount of Each Disbursement this Period 2000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 03		

Full Name (Last, First, Middle Initial) C. CARPER FOR SENATE		Transaction ID: SB23.71207
Mailing Address PO BOX 2882		Date of Disbursement 10 / 10 / 2006
City WILMINGTON	State DE	Zip Code 19805
Purpose of Disbursement THOMAS CARPER	Amount of Each Disbursement this Period 2000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: DE District:		

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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. CARTER FOR NEVADA		Transaction ID: SB23.71262 Date of Disbursement
Mailing Address 9811 W. CHARLESTON BLVD. SUITE 2-567		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City LAS VEGAS	State NV	Zip Code 89117
Purpose of Disbursement JACK CARTER	<input type="text" value=""/> Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NV	District: <input type="text" value=""/>	
		Amount of Each Disbursement this Period <input type="text" value="3000.00"/>

Full Name (Last, First, Middle Initial) B. CHARLIE BROWN FOR CONGRESS		Transaction ID: SB23.71200 Date of Disbursement
Mailing Address 342 LINCOLN STREET		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City ROSEVILLE	State CA	Zip Code 95678
Purpose of Disbursement CHARLIE BROWN	<input type="text" value=""/> Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA	District: 04	
		Amount of Each Disbursement this Period <input type="text" value="1000.00"/>

Full Name (Last, First, Middle Initial) C. CHARLIE WILSON FOR CONGRESS		Transaction ID: SB23.71269 Date of Disbursement
Mailing Address 7 CADIZ PIKE		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="6"/> <input type="text" value="6"/>
City BRIDGEPORT	State OH	Zip Code 43912
Purpose of Disbursement CHARLIE WILSON	<input type="text" value=""/> Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Primary Debt OH	
State: OH	District: 06	
		Amount of Each Disbursement this Period <input type="text" value="5000.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. CHEMA FOR CONGRESS		Transaction ID: SB23.71271 Date of Disbursement																					
Mailing Address 102 BEVERLY PLACE		<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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	6														
City DAYTON	State OH	Zip Code 45419	Amount of Each Disbursement this Period																				
Purpose of Disbursement RICHARD CHEMA		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: OH	District: 02																						

Full Name (Last, First, Middle Initial) B. CHRISTINE JENNINGS FOR CONGRESS		Transaction ID: SB23.71208 Date of Disbursement																					
Mailing Address PO BOX 49135		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City SARASOTA	State FL	Zip Code 34230	Amount of Each Disbursement this Period																				
Purpose of Disbursement CHRISTINE JENNINGS		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: FL	District: 13																						

Full Name (Last, First, Middle Initial) C. CITIZENS FOR ALTMIRE		Transaction ID: SB23.71283 Date of Disbursement																					
Mailing Address PO BOX 1776		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City FREEDOM	State PA	Zip Code 15042	Amount of Each Disbursement this Period																				
Purpose of Disbursement JASON ALTMIRE		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: PA	District: 04																						

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. CITIZENS FOR JIM RINCK		Transaction ID: SB23.71238 Date of Disbursement
Mailing Address 146 MONROE CENTER NW SUITE 1108		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City GRAND RAPIDS	State MI	Zip Code 49503
Purpose of Disbursement JIM RINCK	<input type="text" value="5000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MI	District: 03	

Full Name (Last, First, Middle Initial) B. DAKPAC		Transaction ID: SB23.71205 Date of Disbursement
Mailing Address 420 C STREET NE LOWER LEVEL		<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement CONTRIBUTION	<input type="text" value="5000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

Full Name (Last, First, Middle Initial) C. DARCY BURNER FOR CONGRESS		Transaction ID: SB23.71293 Date of Disbursement
Mailing Address PO BOX 1090		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City CARNATION	State WA	Zip Code 98014
Purpose of Disbursement DARCY BURNER	<input type="text" value="4000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA	District: 08	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="14000.00"/>
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)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DAVID SCOTT FOR CONGRESS		Transaction ID: SB23.71211
Mailing Address 162 HURT STREET, NE		Date of Disbursement 10 / 05 / 2006
City ATLANTA	State GA	Zip Code 30307
Purpose of Disbursement DAVID SCOTT	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: GA District: 13		

Full Name (Last, First, Middle Initial) B. DAVID WU FOR CONGRESS		Transaction ID: SB23.71275
Mailing Address 818 SW THIRD AVENUE #1182		Date of Disbursement 10 / 05 / 2006
City PORTLAND	State OR	Zip Code 97204
Purpose of Disbursement DAVID WU	Amount of Each Disbursement this Period 2000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District: 1		

Full Name (Last, First, Middle Initial) C. DUPAGE COUNTY DEMOCRATIC CENTRAL		Transaction ID: SB23.71220
Mailing Address 123 THE LANE		Date of Disbursement 10 / 17 / 2006
City HINSDALE	State IL	Zip Code 60521
Purpose of Disbursement CONTRIBUTION	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	12000.00
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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. EARL BLUMENAUER FOR CONGRESS		Transaction ID: SB23.71277 Date of Disbursement
Mailing Address P.O. BOX 1396		<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City PORTLAND	State OR	Zip Code 97207
Purpose of Disbursement EARL BLUMENAUER	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OR District: 3		

Full Name (Last, First, Middle Initial) B. ELLEN SIMON FOR CONGRESS		Transaction ID: SB23.71193 Date of Disbursement
Mailing Address PO BOX 20435		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City SEDONA	State AZ	Zip Code 86341
Purpose of Disbursement ELLEN SIMON	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District: 01		

Full Name (Last, First, Middle Initial) C. FATTAH FOR CONGRESS		Transaction ID: SB23.71279 Date of Disbursement
Mailing Address 1800 JFK BLVD., SUITE 502		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City PHILADELPHIA	State PA	Zip Code 19103
Purpose of Disbursement CHAKA FATTAH	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 2		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="6000.00"/>
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)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. FRIENDS OF CONGRESSMAN TIM HOLDEN		Transaction ID: SB23.71278 Date of Disbursement
Mailing Address PO BOX 37		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City ST CLAIR	State PA	Zip Code 17970
Purpose of Disbursement TIM HOLDEN	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 17		

Full Name (Last, First, Middle Initial) B. FRIENDS OF CORRINE BROWN		Transaction ID: SB23.71209 Date of Disbursement
Mailing Address 421 NEW JERSEY AVENUE SE		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CORRINE BROWN	<input type="text" value="3000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 03		

Full Name (Last, First, Middle Initial) C. FRIENDS OF GEORGE MILLER		Transaction ID: SB23.71201 Date of Disbursement
Mailing Address 300 NORTH LEE ST SUITE 500		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City ALEXANDRIA	State VA	Zip Code 22314
Purpose of Disbursement GEORGE MILLER	<input type="text" value="4000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: CA District: 7		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="9000.00"/>
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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. FRIENDS OF JIM OBERSTAR		Transaction ID: SB23.71244 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address PO BOX 2884		Amount of Each Disbursement this Period 4000.00
City WASHINGTON State DC Zip Code 20013	Purpose of Disbursement JIM OBERSTAR Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. GIFFORDS FOR CONGRESS		Transaction ID: SB23.71196 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address PO BOX 27565		Amount of Each Disbursement this Period 4000.00
City TUCSON State AZ Zip Code 85726	Purpose of Disbursement GABRIELLE GIFFORDS Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. GOLDMARK FOR CONGRESS		Transaction ID: SB23.71292 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address PO BOX 1512		Amount of Each Disbursement this Period 2000.00
City SPOKANE State WA Zip Code 99210	Purpose of Disbursement PETER GOLDMARK Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. HOOLEY FOR CONGRESS		Transaction ID: SB23.71276 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address P.O. BOX 465		Amount of Each Disbursement this Period 2000.00
City WEST LINN State OR Zip Code 97068	Purpose of Disbursement DARLENE HOOLEY Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OR District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. JOHN SARBANES FOR CONGRESS		Transaction ID: SB23.71230 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 10 G STREET, NE, SUITE 470		Amount of Each Disbursement this Period 4000.00
City WASHINGTON State DC Zip Code 20002	Purpose of Disbursement JOHN SARBANES Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. KAGEN 4 CONGRESS		Transaction ID: SB23.71295 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 100 WEST COLLEGE AVE. SUITE 50-D		Amount of Each Disbursement this Period 5000.00
City APPLETON State WI Zip Code 54911	Purpose of Disbursement STEVE KAGEN Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. KEITH ELLISON FOR CONGRESS		Transaction ID: SB23.71242 Date of Disbursement 10 / 05 / 2006
Mailing Address PO BOX 11818		Amount of Each Disbursement this Period 5000.00
City MINNEAPOLIS	State MN Zip Code 56002	
Purpose of Disbursement KEITH ELLISON		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 05		

Full Name (Last, First, Middle Initial) B. KENDRICK MEEK FOR CONGRESS		Transaction ID: SB23.71210 Date of Disbursement 10 / 05 / 2006
Mailing Address 2111 WILSON BLVD. 8TH FLOOR		Amount of Each Disbursement this Period 1000.00
City ARLINGTON	State VA Zip Code 22201	
Purpose of Disbursement KENDRICK MEEK		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: FL District: 17		

Full Name (Last, First, Middle Initial) C. KEN LUCAS FOR CONGRESS		Transaction ID: SB23.71224 Date of Disbursement 10 / 05 / 2006
Mailing Address 8100 BURLINGTON PIKE SUITE 334		Amount of Each Disbursement this Period 5000.00
City FLORENCE	State KY Zip Code 41042	
Purpose of Disbursement KENNETH B. LUCAS		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: KY District: 04		

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. KIM CLARK FOR CONGRESS		Transaction ID: SB23.71235 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 107 GENERATIONS DR		Amount of Each Disbursement this Period 2500.00
City THREE OAKS State MI Zip Code 49128	Purpose of Disbursement KIM CLARK	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. KOTOS FOR CONGRESS		Transaction ID: SB23.71236 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 0 6
Mailing Address 3767 SCENIC DR.		Amount of Each Disbursement this Period 2500.00
City NORTH MUSKEGON State MI Zip Code 49445	Purpose of Disbursement KIMON KOTOS	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 2	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. LARRY KISSELL FOR CONGRESS		Transaction ID: SB23.71249 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 106 EAST MAIN STREET		Amount of Each Disbursement this Period 2500.00
City BISCOE State NC Zip Code 27209	Purpose of Disbursement LARRY KISSELL	
Candidate Name		Category/ Type
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 08	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	7500.00
TOTAL This Period (last page this line number only) ▶	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. LINDA STENDER FOR CONGRESS		Transaction ID: SB23.71253 Date of Disbursement 10 / 05 / 2006
Mailing Address PO BOX 730		Amount of Each Disbursement this Period 5000.00
City SCOTCH PLAINS	State NJ	
Zip Code 07076	Purpose of Disbursement LINDA STENDER	
Candidate Name LINDA STENDER	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 07	

Full Name (Last, First, Middle Initial) B. LOBIONDO FOR CONGRESS		Transaction ID: SB23.71259 Date of Disbursement 10 / 17 / 2006
Mailing Address PO BOX 2776		Amount of Each Disbursement this Period 1000.00
City ARLINGTON	State VA	
Zip Code 22202	Purpose of Disbursement FRANK LOBIONDO	
Candidate Name FRANK LOBIONDO	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ	District: 2	

Full Name (Last, First, Middle Initial) C. LOEBSACK FOR CONGRESS		Transaction ID: SB23.71216 Date of Disbursement 10 / 05 / 2006
Mailing Address 385 EAST COLLEGE ST.		Amount of Each Disbursement this Period 2500.00
City IOWA CITY	State IA	
Zip Code 52314	Purpose of Disbursement DAVE LOEBSACK	
Candidate Name DAVE LOEBSACK	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: IA	District: 02	

SUBTOTAL of Disbursements This Page (optional) ▶	8500.00
TOTAL This Period (last page this line number only) ▶

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. MADRID FOR CONGRESS		Transaction ID: SB23.71261 Date of Disbursement																					
Mailing Address 200 OAK STREET NE, SUITE 4		<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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	6														
City ALBUQUERQUE	State NM	Zip Code 87106	Amount of Each Disbursement this Period																				
Purpose of Disbursement PATRICIA MADRID		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NM	District: 01																						

Full Name (Last, First, Middle Initial) B. MARYLAND DEMOCRATIC PARTY		Transaction ID: SB23.71232 Date of Disbursement																					
Mailing Address 188 MAIN STREET - SUITE 1		<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
City ANNAPOLIS	State MD	Zip Code 21401	Amount of Each Disbursement this Period																				
Purpose of Disbursement CONTRIBUTION		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State:	District:																						

Full Name (Last, First, Middle Initial) C. MEL WATT FOR CONGRESS		Transaction ID: SB23.71247 Date of Disbursement																					
Mailing Address PO BOX 36831		<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>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	0		2	0	0	6														
City CHARLOTTE	State NC	Zip Code 28236	Amount of Each Disbursement this Period																				
Purpose of Disbursement MELVIN WATT		Category/ Type	3000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NC	District: 12																						

SUBTOTAL of Disbursements This Page (optional)	▶	13000.00
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. MURTHA FOR CONGRESS		Transaction ID: SB23.71281 Date of Disbursement 10 / 05 / 2006
Mailing Address P O BOX 1091		Amount of Each Disbursement this Period 5000.00
City JOHNSTOWN State PA Zip Code 15907	Purpose of Disbursement JOHN MURTHA Candidate Name	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 12	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. OKLAHOMA STATE PAC		Transaction ID: SB23.71274 Date of Disbursement 10 / 17 / 2006
Mailing Address 7125 S. AIR DEPOT BLVD.		Amount of Each Disbursement this Period 5000.00
City OKLAHOMA CITY State OK Zip Code 73135	Purpose of Disbursement CONTRIBUTION Candidate Name	
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) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. PAC TO THE FUTURE		Transaction ID: SB23.71233 Date of Disbursement 10 / 17 / 2006
Mailing Address 5910 GLOSTER ROAD		Amount of Each Disbursement this Period 5000.00
City BETHESDA State MD Zip Code 20816	Purpose of Disbursement CONTRIBUTION Candidate Name	
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) ▼	Category/ Type

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. PALLONE FOR CONGRESS		Transaction ID: SB23.71255 Date of Disbursement 10 / 05 / 2006
Mailing Address P.O. BOX 3176		Amount of Each Disbursement this Period 4000.00
City LONG BRANCH State NJ Zip Code 07740	Purpose of Disbursement FRANK PALLONE Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 06	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. PASCRELL FOR CONGRESS		Transaction ID: SB23.71252 Date of Disbursement 10 / 05 / 2006
Mailing Address 63 QUARTZ LANE		Amount of Each Disbursement this Period 2500.00
City PATERSON State NJ Zip Code 07501	Purpose of Disbursement WILLIAM J PASCRELL JR Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 8	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. PAUL ARONSOHN FOR CONGRESS		Transaction ID: SB23.71254 Date of Disbursement 10 / 05 / 2006
Mailing Address PO BOX 563		Amount of Each Disbursement this Period 4000.00
City RIDGEWOOD State NJ Zip Code 07451-0563	Purpose of Disbursement PAUL ARONSOHN Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 05	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	10500.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. PEDERSON 2006		Transaction ID: SB23.71198 Date of Disbursement 10 / 16 / 2006
Mailing Address 531 E. MCDOWELL RD.		Amount of Each Disbursement this Period 3000.00
City PHOENIX State AZ Zip Code 85004		
Purpose of Disbursement JIM PEDERSON		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: AZ District:		

Full Name (Last, First, Middle Initial) B. PENNSYLVANIANS FOR KANJORSKI		Transaction ID: SB23.71284 Date of Disbursement 10 / 05 / 2006
Mailing Address PO BOX 2884		Amount of Each Disbursement this Period 2000.00
City WASHINGTON State DC Zip Code 20013		
Purpose of Disbursement PAUL E KANJORSKI		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: PA District: 11		

Full Name (Last, First, Middle Initial) C. PETERSON FOR CONGRESS		Transaction ID: SB23.71240 Date of Disbursement 10 / 05 / 2006
Mailing Address PO BOX 265		Amount of Each Disbursement this Period 5000.00
City DETROIT LAKES State MN Zip Code 56502		
Purpose of Disbursement COLLIN PETERSON		Category/ Type
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: MN District: 7		

SUBTOTAL of Disbursements This Page (optional) ▶	10000.00
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 100 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RALEIGH FOR CONGRESS		Transaction ID: SB23.71245 Date of Disbursement																					
Mailing Address PO BOX 241598		<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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	6														
City APPLE VALLEY	State MN	Zip Code 55124	Amount of Each Disbursement this Period																				
Purpose of Disbursement COLLEEN ROWLEY		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MN	District: 02																						

Full Name (Last, First, Middle Initial) B. RANGEL FOR CONGRESS 2000		Transaction ID: SB23.71265 Date of Disbursement																					
Mailing Address PO BOX 5577		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City NEW YORK	State NY	Zip Code 10027	Amount of Each Disbursement this Period																				
Purpose of Disbursement CHARLES P RANGEL		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NY	District: 15																						

Full Name (Last, First, Middle Initial) C. RAUL GRIJALVA FOR CONGRESS		Transaction ID: SB23.71194 Date of Disbursement																					
Mailing Address PO BOX 1242		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City TUCSON	State AZ	Zip Code 85702-1242	Amount of Each Disbursement this Period																				
Purpose of Disbursement RAUL GRIJALVA		Category/ Type	1000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: AZ	District: 07																						

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 101 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RICHARD WRIGHT FOR CONGRESS		Transaction ID: SB23.71290
Mailing Address PO BOX 6181		Date of Disbursement 10 / 05 / 2006
City KENNEWICK	State WA	Zip Code 99336-0181
Purpose of Disbursement RICHARD WRIGHT	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: WA District: 04		

Full Name (Last, First, Middle Initial) B. ROBIN FOR CONGRESS		Transaction ID: SB23.71272
Mailing Address PO BOX 301		Date of Disbursement 10 / 17 / 2006
City NAPOLEON	State OH	Zip Code 43545
Purpose of Disbursement ROBIN WEIRAUCH	Amount of Each Disbursement this Period 1000.00	
Candidate Name	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 5		

Full Name (Last, First, Middle Initial) C. ROCK ISLAND COUNTY DEMOCRATIC GOTV		Transaction ID: SB23.71218
Mailing Address PO BOX 3382		Date of Disbursement 10 / 17 / 2006
City ROCK ISLAND	State IL	Zip Code 61204-3382
Purpose of Disbursement CONTRIBUTION	Amount of Each Disbursement this Period 5000.00	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	7000.00
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 102 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. RUSH HOLT FOR CONGRESS		Transaction ID: SB23.71250 Date of Disbursement																					
Mailing Address P O BOX 782		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City PENNINGTON	State NJ	Zip Code 08534	Amount of Each Disbursement this Period																				
Purpose of Disbursement RUSH HOLT		Category/ Type	4000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NJ	District: 12																						

Full Name (Last, First, Middle Initial) B. SANFORD D. BISHOP JR. FOR CONGRESS		Transaction ID: SB23.71213 Date of Disbursement																					
Mailing Address PO BOX 909		<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>1</td><td>0</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	6		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	6		2	0	0	6														
City COLUMBUS	State GA	Zip Code 31902	Amount of Each Disbursement this Period																				
Purpose of Disbursement SANFORD BISHOP		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: GA	District: 02																						

Full Name (Last, First, Middle Initial) C. SHAWN O'DONNELL FOR CONGRESS		Transaction ID: SB23.71287 Date of Disbursement																					
Mailing Address 1418 AUGUSTINE AVENUE		<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>1</td><td>0</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	0		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	0		2	0	0	6														
City FREDERICKSBURG	State VA	Zip Code 22401	Amount of Each Disbursement this Period																				
Purpose of Disbursement SHAWN O'DONNELL		Category/ Type	1000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: VA	District: 01																						

SUBTOTAL of Disbursements This Page (optional)	▶	10000.00
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 103 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. SHELLEY BERKLEY FOR CONGRESS		Transaction ID: SB23.71264	
Mailing Address 7432 SILVER PALM COURT		Date of Disbursement 10 / 05 / 2006	
City LAS VEGAS	State NV	Zip Code 89117	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement SHELLEY BERKLEY		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NV District: 1			

Full Name (Last, First, Middle Initial) B. SHERMAN FOR CONGRESS COMMITTEE		Transaction ID: SB23.71202	
Mailing Address 20929 VENTURA BLVD, BOX 615		Date of Disbursement 10 / 05 / 2006	
City WOODLAND HILLS	State CA	Zip Code 91364	Amount of Each Disbursement this Period 3000.00
Purpose of Disbursement BRAD SHERMAN		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: CA District: 27			

Full Name (Last, First, Middle Initial) C. SIRES FOR CONGRESS		Transaction ID: SB23.71257	
Mailing Address PO BOX 300		Date of Disbursement 10 / 05 / 2006	
City WEST NEW YORK	State NJ	Zip Code 07093	Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement ALBIO SIRES		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 13			

SUBTOTAL of Disbursements This Page (optional)	7500.00
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 104 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. SPIVAK FOR CONGRESS		Transaction ID: SB23.71206 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address PO BOX 7957		Amount of Each Disbursement this Period 2000.00
City WILMINGTON State DE Zip Code 19803	Category/ Type	
Purpose of Disbursement DENNIS SPIVAK		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: DE District: 01	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. STEVE ROTHMAN FOR CONGRESS INC.		Transaction ID: SB23.71258 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 0 / 2 0 0 6
Mailing Address 38 IVY STREET, S.E.		Amount of Each Disbursement this Period 2000.00
City WASHINGTON State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement STEVE ROTHMAN		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 9	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. STOVER FOR CONGRESS US		Transaction ID: SB23.71222 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 1 7 / 2 0 0 6
Mailing Address PO BOX 1945		Amount of Each Disbursement this Period 5000.00
City CENTRALIA State IL Zip Code 62801	Category/ Type	
Purpose of Disbursement DANNY L. STOVER		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 19	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	9000.00
TOTAL This Period (last page this line number only) ▶

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 105 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. TAMMY BALDWIN FOR CONGRESS		Transaction ID: SB23.71297 Date of Disbursement																					
Mailing Address P O BOX 696		<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>1</td><td>0</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		1	7		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		1	7		2	0	0	6														
City MADISON	State WI	Zip Code 53701	Amount of Each Disbursement this Period																				
Purpose of Disbursement TAMMY BALDWIN		Category/ Type	3000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: WI	District: 2																						

Full Name (Last, First, Middle Initial) B. TESSA HAFEN FOR CONGRESS		Transaction ID: SB23.71263 Date of Disbursement																					
Mailing Address PO BOX 530996		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City HENDERSON	State NV	Zip Code 89053	Amount of Each Disbursement this Period																				
Purpose of Disbursement TESSA HAFEN		Category/ Type	4000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: NV	District: 03																						

Full Name (Last, First, Middle Initial) C. TIM WALTZ FOR CONGRESS		Transaction ID: SB23.71239 Date of Disbursement																					
Mailing Address PO BOX 938		<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>1</td><td>0</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>6</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	5		2	0	0	6
M	M	/	D	D	/	Y	Y	Y	Y														
1	0		0	5		2	0	0	6														
City MANKATO	State MN	Zip Code 56002	Amount of Each Disbursement this Period																				
Purpose of Disbursement TIM WALTZ		Category/ Type	5000.00																				
Candidate Name																							
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: MN	District: 01																						

SUBTOTAL of Disbursements This Page (optional)	▶	12000.00
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 106 / 111

<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)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. WEST VIRGINIA STATE DEMOCRATIC PARTY		Transaction ID: SB23.71299 Date of Disbursement
Mailing Address 717 LEE STREET - SUITE 214		<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City CHARLESTON	State WV	Zip Code 25301
Purpose of Disbursement CONTRIBUTION	<input type="text" value="5000.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. WOMEN'S SENATE NETWORK		Transaction ID: SB23.71204 Date of Disbursement
Mailing Address 120 MARYLAND AVE. NE		<input type="text" value="10"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20002
Purpose of Disbursement CONTRIBUTION	<input type="text" value="500.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WULSIN FOR CONGRESS		Transaction ID: SB23.71268 Date of Disbursement
Mailing Address 7440 MONTGOMERY RD.		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City CINCINNATI	State OH	Zip Code 45236
Purpose of Disbursement VICTORIA WULSIN	<input type="text" value="5000.00"/>	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2006 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: OH District: 02		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10500.00"/>
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)

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

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)

UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial)

A. WYNN FOR CONGRESS

Mailing Address 7003 DOGWOOD RD

City State Zip Code
BALTIMORE MD 21244

Purpose of Disbursement
ALBERT R WYNN

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: MD District: 4

Transaction ID: SB23.71228

Date of Disbursement

10 / 05 / 2006

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

TOTAL This Period (last page this line number only)

274000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DEMOCRATIC GOVERNORS' ASSOCIATION		Transaction ID: SB29.71305 Date of Disbursement
Mailing Address 430 S. CAPITOL SE		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION	<input type="text" value="10000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC GOVERNORS' ASSOCIATION		Transaction ID: SB29.71306 Date of Disbursement
Mailing Address 430 S. CAPITOL SE		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION	<input type="text" value="50000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. DEMOCRATIC GOVERNORS' ASSOCIATION		Transaction ID: SB29.71308 Date of Disbursement
Mailing Address 430 S. CAPITOL SE		<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION	<input type="text" value="10000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="70000.00"/>
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)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. DEMOCRATIC GOVERNORS' ASSOCIATION		Transaction ID: SB29.71309 Date of Disbursement
Mailing Address 430 S. CAPITOL SE		<input type="text" value="10"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City WASHINGTON	State DC	Zip Code 20003
Purpose of Disbursement CONTRIBUTION	<input type="text" value="10000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DEMOCRATIC PARTY OF WISCONSIN		Transaction ID: SB29.71303 Date of Disbursement
Mailing Address 222 STATE STREET, SUITE 400		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City MADISON	State WI	Zip Code 53703
Purpose of Disbursement CONTRIBUTION	<input type="text" value="5000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. UAW LOCAL 1612		Transaction ID: SB29.71307 Date of Disbursement
Mailing Address 1375 VIRGINIA DRIVE SUITE 202		<input type="text" value="10"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="06"/>
City FORT WASHINGTON	State PA	Zip Code 19034-3217
Purpose of Disbursement REIMBURSE WAGES-PATRICK ASHTON	<input type="text" value="6459.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="21459.00"/>
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)

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

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NAME OF COMMITTEE (In Full)
UAW - V - CAP (UAW VOLUNTARY COMMUNITY ACTION PROGRAM)

Full Name (Last, First, Middle Initial) A. UAW MICHIGAN V-PAC		Transaction ID: SB29.71300 Date of Disbursement
Mailing Address 8000 E. JEFFERSON		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City DETROIT	State MI	Zip Code 48214
Purpose of Disbursement TRANSFER OF FUNDS	<input type="text" value="300000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. UAW MICHIGAN V-PAC		Transaction ID: SB29.71301 Date of Disbursement
Mailing Address 8000 E. JEFFERSON		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City DETROIT	State MI	Zip Code 48214
Purpose of Disbursement TRANSFER OF FUNDS	<input type="text" value="900000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. WORKING FAMILIES PARTY		Transaction ID: SB29.71302 Date of Disbursement
Mailing Address 88 THIRD AVE, 4TH FLOOR		<input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="6"/>
City BROOKLYN	State NY	Zip Code 11217
Purpose of Disbursement HOUSEKEEPING EXPENSES	<input type="text" value="25000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1225000.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="1316459.00"/>

Image# 26960577230

Form/Schedule: **SB23** 2006 Primary Debt OH

Transaction ID: **SB23.71269**
