

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines. 12FE4M5

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 ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00002840

3. IS THIS  
REPORTNEW  
(N)

OR

AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☒ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

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

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

CASTEEL, GARY, , ,

Type or Print Name of Treasurer

Signature of Treasurer

CASTEEL, GARY, , ,

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 05/2016

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

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

Report Covering the Period: From: M M / D D / Y Y Y Y Y Y  
07 / 01 / 2016 To: M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <span style="border: 1px solid black; padding: 2px;">Y Y Y Y Y Y</span> <span style="border: 1px solid black; padding: 2px;">2016</span>		<span style="border: 1px solid black; padding: 2px;">13571761.04</span>
(b) Cash on Hand at Beginning of Reporting Period.....	<span style="border: 1px solid black; padding: 2px;">13620290.36</span>	
(c) Total Receipts (from Line 19) .....	<span style="border: 1px solid black; padding: 2px;">2363769.49</span>	<span style="border: 1px solid black; padding: 2px;">4417265.03</span>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<span style="border: 1px solid black; padding: 2px;">15984059.85</span>	<span style="border: 1px solid black; padding: 2px;">17989026.07</span>
7. Total Disbursements (from Line 31) .....	<span style="border: 1px solid black; padding: 2px;">2252288.50</span>	<span style="border: 1px solid black; padding: 2px;">4257254.72</span>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<span style="border: 1px solid black; padding: 2px;">13731771.35</span>	<span style="border: 1px solid black; padding: 2px;">13731771.35</span>
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	<span style="border: 1px solid black; padding: 2px;">0.00</span>	

☒ 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

FEC Form 3X (Rev. 05/2016)

Page 3

Write or Type Committee Name

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

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	6

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	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		
(i) Itemized (use Schedule A).....	58901.06	78073.30
(ii) Unitemized .....	2301819.71	4314514.52
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	2360720.77	4392587.82
(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) .....	2360720.77	4392587.82
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	15250.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	3048.72	9427.21
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 Transfers (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)) .....	2363769.49	4417265.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	2363769.49	4417265.03

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	202738.50	731922.01
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	202738.50	731922.01
22. Transfers to Affiliated/Other Party Committees.....	1125000.00	1625000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	389700.00	719650.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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	132.71
(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	132.71
29. Other Disbursements (Including Non-Federal Donations).....	534850.00	1180550.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	2252288.50	4257254.72
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	2252288.50	4257254.72

**DETAILED SUMMARY PAGE**  
of Disbursements

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Page 5

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) .....	2360720.77	4392587.82
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	132.71
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	2360720.77	4392455.11
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	202738.50	731922.01
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	202738.50	731922.01

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

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

FOR LINE NUMBER: PAGE 6 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ACKERMANN, ROBERT, , ,**

Mailing Address 1523 CASTILLO ST.,APT. 2

City

SANTA BARBARA

State

CA

Zip Code

93101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CALIFORNIA (UNIVERSITY OF)

Occupation (for Individual)

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11AI.154850

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ANDERSON, CHONITA, , ,**

Mailing Address 39260 NOTTINGHAM

City

ROMULUS

State

MI

Zip Code

48174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

FCA US LLC

Occupation (for Individual)

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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.155278

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ARNOLD, JERRY, , ,**

Mailing Address 11737 FROST RD.

City

MANTUA

State

OH

Zip Code

44255-9315

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

CONGOLEUM CORP

Occupation (for Individual)

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 Y Y  
08 / 31 / 2016

Transaction ID : SA11AI.154949

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

460.00

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

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

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

FOR LINE NUMBER: PAGE 7 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ASHE, SARAH, , ,

Mailing Address 628 MASON AVE

City  
SUFFOLKState  
VAZip Code  
23434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS NORTH AMERICA INCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11Al.154948

Amount of Each Receipt this Period

56.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ASHE, SARAH, , ,

Mailing Address 628 MASON AVE

City  
SUFFOLKState  
VAZip Code  
23434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS NORTH AMERICA INCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.154244

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ASHTON, DENISE, , ,

Mailing Address 5 QUEEN ANNE CT.

City  
OCEAN VIEWState  
NJZip Code  
08230FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 08 / 2016

Transaction ID : SA11Al.155498

Amount of Each Receipt this Period

600.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

681.25

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

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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 8 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. AUGSBURGER, ROGER, , ,**

Mailing Address 494 CHERRY ST

City  
BLUFFTON

State  
OH

Zip Code  
45817-1356

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOWER INTERNATIONAL

Occupation (for Individual)  
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 Y  
09 / 20 / 2016

Transaction ID : SA11AI.155384

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. AURILIO, MICHAEL, , ,**

Mailing Address 1142 RIDGE ROAD

City  
VIENNA

State  
OH

Zip Code  
44473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

318.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 06 / 2016

Transaction ID : SA11AI.154167

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. AYRES, ANNETTE, , ,**

Mailing Address 326 TOMS ROAD

City  
CASTOR

State  
LA

Zip Code  
71016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.154417

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00



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

Use separate schedule(s)  
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Detailed Summary Page

FOR LINE NUMBER: PAGE 9 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. AYRES, JERRY, , ,

Mailing Address PO BOX 697

City  
SPRING HILL

State  
TN

Zip Code  
37174-0697

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154712

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BANKS, ALFONSO, , ,

Mailing Address 3919 CORA MAPLE COURT

City  
CHESAPEAKE

State  
VA

Zip Code  
23225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.154310

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BANKS, ALFONSO, , ,

Mailing Address 3919 CORA MAPLE COURT

City  
CHESAPEAKE

State  
VA

Zip Code  
23225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

406.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154610

Amount of Each Receipt this Period

81.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

412.50

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

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

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

FOR LINE NUMBER: PAGE 10 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BANKS, ALFONSO, , ,**

Mailing Address 3919 CORA MAPLE COURT

City  
CHESAPEAKE

State  
VA

Zip Code  
23225

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

431.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.154003

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BARRON, LARRY, , ,**

Mailing Address 658 TRAFALGAR DRIVE

City  
HAGERSTOWN

State  
MD

Zip Code  
21742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 29 / 2016

Transaction ID : SA11Al.154551

Amount of Each Receipt this Period

350.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BEMBERY, LENA, , ,**

Mailing Address 18501 PARKSIDE

City  
DETROIT

State  
MI

Zip Code  
48221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11Al.153547

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

675.00

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

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

FOR LINE NUMBER: PAGE 11 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BERRY, DAVE, , ,

Mailing Address PO BOX 764

City  
FOWLERVILLE

State  
MI

Zip Code  
48836

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.153872

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BESS, BRIAN, , ,

Mailing Address 29759 ROAN

City  
WARREN

State  
MI

Zip Code  
48093

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.153873

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BINGENHEIMER, MARY, , ,

Mailing Address 3936 CUTTY SARK ROAD

City  
CHERRY VALLEY

State  
IL

Zip Code  
61016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y Y  
07 / 28 / 2016

Transaction ID : SA11AI.153855

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

435.00

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

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

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

FOR LINE NUMBER: PAGE 12 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BINGENHEIMER, MARY, , ,**

Mailing Address 3936 CUTTY SARK ROAD

City  
CHERRY VALLEY

State  
IL

Zip Code  
61016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 02 / 2016

Transaction ID : SA11AI.154888

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BINGENHEIMER, MARY, , ,**

Mailing Address 3936 CUTTY SARK ROAD

City  
CHERRY VALLEY

State  
IL

Zip Code  
61016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.153856

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BINGHAM, BRADLY, , ,**

Mailing Address 8039 VINEYARD LANE

City  
LAVERGNE

State  
TN

Zip Code  
37086

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.153748

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

225.00

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

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

FOR LINE NUMBER: PAGE 13 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BIRDSALL, SCOTT, , ,

Mailing Address 9301 SUNRISE LANE

City  
DAVISONState  
MIZip Code  
48423FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAWOccupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11Al.154170

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BORKS, DONIS, , ,

Mailing Address 5887 TOWER RD.

City  
RIVERSIDEState  
CAZip Code  
92506-1973FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NOLSWOccupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2016

Transaction ID : SA11Al.155471

Amount of Each Receipt this Period

300.30

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BORTZ, DAVID, , ,

Mailing Address 112 CARRIAGE OAKS DRIVE

City  
COLUMBIAState  
SCZip Code  
29229-9302FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAWOccupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11Al.153881

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

675.30

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

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

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

FOR LINE NUMBER: PAGE 14 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BOUGENO, KENNETH, , ,**

Mailing Address P.O. BOX 509

City  
CEDAR HILL

State  
MO

Zip Code  
63016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y Y  
08 / 17 / 2016

Transaction ID : SA11Al.154221

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BOUGENO, KENNETH, , ,**

Mailing Address P.O. BOX 509

City  
CEDAR HILL

State  
MO

Zip Code  
63016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 02 / 2016

Transaction ID : SA11Al.154523

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BOUGENO, KENNETH, , ,**

Mailing Address P.O. BOX 509

City  
CEDAR HILL

State  
MO

Zip Code  
63016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11Al.154524

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

300.00

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

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

FOR LINE NUMBER: PAGE 15 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. BOWERS, DALE, , ,

Mailing Address 74820 SPENCER

City  
ARMADA

State  
MI

Zip Code  
48005

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155521

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. BOYD, CLIFFORD, , ,

Mailing Address 9405 BRIDGEFORD CIR.

City  
FORT SMITH

State  
AZ

Zip Code  
72908-9286

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INGERSOLL-RAND COMPANY LIMITED

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.154708

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. BOYD, CLIFFORD, , ,

Mailing Address 9405 BRIDGEFORD CIR.

City  
FORT SMITH

State  
AZ

Zip Code  
72908-9286

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INGERSOLL-RAND COMPANY LIMITED

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.153787

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

180.00

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

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

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

FOR LINE NUMBER: PAGE 16 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BRADFORD, KENNETH, , ,**

Mailing Address 3325 PETE SHAW RD

City  
MARIETTA

State  
GA

Zip Code  
30066-2354

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AI.154046

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, JODY, , ,**

Mailing Address 302 S MAIN STREET

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

343.75

Date of Receipt

07 / 26 / 2016

Transaction ID : SA11AI.155127

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, JODY, , ,**

Mailing Address 302 S MAIN STREET

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

418.75

Date of Receipt

09 / 23 / 2016

Transaction ID : SA11AI.153650

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

406.25



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

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

FOR LINE NUMBER: PAGE 17 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BROWN, SARAH, , ,**

Mailing Address 2500 GREENS MILL RD

City  
COLUMBIA

State  
TN

Zip Code  
38401-6177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
08 / 22 / 2016

Transaction ID : SA11Al.153567

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. BROWN, VERNAL, , ,**

Mailing Address 8417 JACKLIN CT

City  
HAZELWOOD

State  
MO

Zip Code  
63042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
07 / 28 / 2016

Transaction ID : SA11Al.153518

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. BROWN, VERNAL, , ,**

Mailing Address 8417 JACKLIN CT

City  
HAZELWOOD

State  
MO

Zip Code  
63042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11Al.154881

Amount of Each Receipt this Period

200.00

☐ Memo Item

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

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

600.00

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

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

FOR LINE NUMBER: PAGE 18 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **BROWN, VERNAL, , ,**

Mailing Address 8417 JACKLIN CT

City  
HAZELWOOD

State  
MO

Zip Code  
63042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.154618

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **Bunn, Elizabeth, , ,**

Mailing Address 1607 Highland Drive

City  
Silver Springs

State  
MD

Zip Code  
20190-2218

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 08 / 2016

Transaction ID : SA11Al.155089

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **BUTLER, SANCHIONI, , ,**

Mailing Address 1207 SUZANNA DRIVE

City  
RAYMOND

State  
MS

Zip Code  
39154

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11Al.153844

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

475.00

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

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

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

FOR LINE NUMBER: PAGE 19 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. BUTTRAM, ARCHIE, , ,**

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 (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.154357

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CAIN, BENJAMIN, , ,**

Mailing Address 1209 ALICE STREET

City  
DAVIS

State  
CA

Zip Code  
95616

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CALIFORNIA (UNIVERSITY OF)

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

432.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11Al.153812

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CALDWELL, DENISE, , ,**

Mailing Address 19135 ROLANDEALE

City  
GROSSE POINTE

State  
MI

Zip Code  
48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11Al.154097

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

220.00

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

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

FOR LINE NUMBER: PAGE 20 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CAMPBELL, SHAWN, , ,**

Mailing Address 5333 E DUNBAR ROAD

City  
MONROE

State  
MI

Zip Code  
48161

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.153911

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CARR, JANET, , ,**

Mailing Address 2110 OLD ORCHARD

City

POPLAR BLUFF

State

MO

Zip Code

63901

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155386

Amount of Each Receipt this Period

275.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CARSON, JERRY, , ,**

Mailing Address 44559 CHERRY HILL RD

City

CANTON

State

MI

Zip Code

48188-3094

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
08 / 24 / 2016

Transaction ID : SA11AI.154231

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

875.00

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

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

FOR LINE NUMBER: PAGE 21 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CASH, YVONNE, , ,

Mailing Address 22121 BEVERLY

City  
OAK PARK

State  
MI

Zip Code  
48237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11Al.154061

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CASTEEL, GARY, , ,

Mailing Address 1975 NEPTUNE ROAD

City  
ASHLAND CITY

State  
TN

Zip Code  
37015-6173

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11Al.154645

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHAMBERLAIN, DEBORAH, , ,

Mailing Address P.O. BOX 1182

City  
BELLEVILLE

State  
MI

Zip Code  
48112

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11Al.154752

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

675.00

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

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

FOR LINE NUMBER: PAGE 22 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. CHEEKS, STEVEN, , ,

Mailing Address 1005 ENGLISH OAK DR.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.155469

Amount of Each Receipt this Period

18.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. CHEEKS, STEVEN, , ,

Mailing Address 1005 ENGLISH OAK DR.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.155418

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. CHEEKS, STEVEN, , ,

Mailing Address 1005 ENGLISH OAK DR.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155210

Amount of Each Receipt this Period

31.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

131.25

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

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

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

FOR LINE NUMBER: PAGE 23 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CLEVELAND, DAVID, , ,**

Mailing Address 1546 ASHTON DR

City  
LIBERTY

State  
MO

Zip Code  
64068-3295

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2301.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154202

Amount of Each Receipt this Period

2201.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CLEVELAND, DAVID, , ,**

Mailing Address 1546 ASHTON DR

City  
LIBERTY

State  
MO

Zip Code  
64068-3295

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2351.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11AI.154338

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COGER, TIFFANY, , ,**

Mailing Address 5125 HEATHER DRIVE UNIT #103

City  
DEARBORN

State  
MI

Zip Code  
48126

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 06 / 2016

Transaction ID : SA11AI.154956

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

2551.00

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

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

FOR LINE NUMBER: PAGE 24 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CONNOLLY, JOYCE, , ,**

Mailing Address 2434 CATON CREST CT

City  
CREST HILL

State  
IL

Zip Code  
60403

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS

Occupation (for Individual)  
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 Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.155209

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. COWLING, RHONDA, , ,**

Mailing Address 305 N CAPITAL ST.

City  
SUFFOLK

State  
VA

Zip Code  
23434-3419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
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 Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.155375

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. COWLING, RHONDA, , ,**

Mailing Address 305 N CAPITAL ST.

City  
SUFFOLK

State  
VA

Zip Code  
23434-3419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.155334

Amount of Each Receipt this Period

81.25

☐ Memo Item

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

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

412.50



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

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

FOR LINE NUMBER: PAGE 25 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. COWLING, RHONDA, , ,

Mailing Address 305 N CAPITAL ST.

City  
SUFFOLK

State  
VA

Zip Code  
23434-3419

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.155376

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. COX, LLOYD, , ,

Mailing Address 3805 HARROGATE DR.

City  
NORMAN

State  
OK

Zip Code  
73072

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154356

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. COX, MICHAEL, , ,

Mailing Address PO BOX 359,2201/2 WEST MAIN ST

City  
STOCKBRIDGE

State  
MI

Zip Code  
49285

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.154071

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

931.25

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

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

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

FOR LINE NUMBER: PAGE 26 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. COX-WILSON, PAMELA, , ,**

Mailing Address 31511 BRETZ DR.

 City  
 WARREN

 State  
 MI

 Zip Code  
 48093

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 FCA US LLC

 Occupation (for Individual)  
 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 Y  
 09 / 30 / 2016

Transaction ID : SA11AI.153890

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CROUCH, ROBIN, , ,**

Mailing Address 116 EL PERRO DR

 City  
 SAINT PETERS

 State  
 MO

 Zip Code  
 63376-1157

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 GENERAL MOTORS CORPORATION

 Occupation (for Individual)  
 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 Y Y  
 09 / 28 / 2016

Transaction ID : SA11AI.154012

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. CRUMP, CHRISTOPHER, , ,**

Mailing Address 3104 FENTON RD

 City  
 HARTLAND

 State  
 MI

 Zip Code  
 48353-2202

 FEC ID number of contributing  
 federal political committee.

C

 Name of Employer (for Individual)  
 INTERNATIONAL UNION, UAW

 Occupation (for Individual)  
 INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

 M M / D D / Y Y Y Y Y Y  
 08 / 23 / 2016

Transaction ID : SA11AI.153886

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

660.00

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

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

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

FOR LINE NUMBER: PAGE 27 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. CULLEMBER, LEANNE, , ,**

Mailing Address 717 SHORE RD

City  
SEVERNA PARK

State  
MD

Zip Code  
21146-3429

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MACK TRUCK

Occupation (for Individual)  
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 Y Y  
08 / 29 / 2016

Transaction ID : SA11AI.153789

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. CURRY JR, RAYMOND, , ,**

Mailing Address 2118 WOODCLIFF DRIVE

City  
SMYRNA

State  
TN

Zip Code  
37167

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154075

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DAVENPORT, CHUCK, , ,**

Mailing Address PO BOX 38949

City  
CHARLOTTE

State  
NC

Zip Code  
28278-1016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154007

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

450.00

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

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

FOR LINE NUMBER: PAGE 28 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DAVIS, RAYMOND, , ,

Mailing Address 643 POINSETTIA DRIVE

City  
LARGO

State  
FL

Zip Code  
33770

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.153836

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DEANE, GORDON E, , ,

Mailing Address 8 S MAIN AVE

City  
ALBANY

State  
NY

Zip Code  
12208-2618

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEGAL SERVICES FOR NEW YORK

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2016

Transaction ID : SA11AI.155071

Amount of Each Receipt this Period

520.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DEARING, JANET, , ,

Mailing Address 150 CUIVRE RIDGE DR

City  
TROY

State  
MO

Zip Code  
63379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEAR CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154980

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

870.00

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

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 29 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. DEARING, JANET, , ,

Mailing Address 150 CUIVRE RIDGE DR

City  
TROYState  
MOZip Code  
63379FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEAR CORPORATIONOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11Al.154277

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. DICKERSON, LAURA, , ,

Mailing Address 29553 CHELMSFORD ROAD

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAWOccupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : SA11Al.154057

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. DIXON, BRANDON, , ,

Mailing Address 1429 CANISBAY COURT

City

VIRGINIA BEACH

State

VA

Zip Code

23464

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

331.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11Al.155017

Amount of Each Receipt this Period

31.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

381.25

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

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

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

FOR LINE NUMBER: PAGE 30 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DIXON, BRANDON, , ,**

Mailing Address 1429 CANISBAY COURT

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23464

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

412.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154452

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DIXON, LARRY, , ,**

Mailing Address 1207 LEEDS ROAD

City  
ELKTON

State  
MD

Zip Code  
21921

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.154019

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DOYLE, LAWRENCE, , ,**

Mailing Address 7798 KITNER BLVD

City  
NORTHFIELD

State  
OH

Zip Code  
44067-2708

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 20 / 2016

Transaction ID : SA11AI.155545

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

681.25

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DUBBERKE, KYLE, , ,**

Mailing Address 3703 LASALLE DR

City  
ARLINGTON

State  
TX

Zip Code  
76016-2930

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 15 / 2016

Transaction ID : SA11Al.154678

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DUKE, ROBERT, , ,**

Mailing Address 3530 PIEDMONT ROAD

City  
ATLANTA

State  
GA

Zip Code  
30305

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11Al.154675

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. DUNN, GREGG, , ,**

Mailing Address 2732 SYRACUSE STREET

City  
DEARBORN

State  
MI

Zip Code  
48124

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11Al.154669

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

625.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. DURHAM, HARVEY, , ,**

Mailing Address 1276 FIRST AVENUE

City  
LAWRENCEBURG

State  
TN

Zip Code  
38464

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 29 / 2016

Transaction ID : SA11AI.155076

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. DURHAM, KELLY Y, , ,**

Mailing Address 29864 CITY CENTER DR.

City  
WARREN

State  
MI

Zip Code  
48093-2431

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154862

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EADDY, WILLIAM, , ,**

Mailing Address 14101 TOWNSEND ROAD

City  
MILAN

State  
MI

Zip Code  
48160

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2016

Transaction ID : SA11AI.154461

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

660.00

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



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. EASON, DEAN, , ,

Mailing Address 16007 GLENMIRO DRIVE

City  
HUNTERSVILLE

State  
NC

Zip Code  
28078

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154782

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. EDWARDS, R. SCOTT, , ,

Mailing Address 1609 NOLE DRIVE

City  
JEFFERSONVILL

State  
IN

Zip Code  
47130

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.154751

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ELLIS, WILLIAM, , ,

Mailing Address 29106 YORK

City  
INKSTER

State  
MI

Zip Code  
48141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154105

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

675.00

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

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ENGLAND, GARY, , ,**

Mailing Address 1830 CO ROAD 84

City  
DANVILLE

State  
AL

Zip Code  
35619

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 22 / 2016

Transaction ID : SA11AL154923

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ENSIGN, DALE, , ,**

Mailing Address 109 S MILL ST

City  
WELLINGTON

State  
OH

Zip Code  
44090-1255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSON MFG COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AL155106

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ESTES, MARK, , ,**

Mailing Address 5336 MINES RD

City  
PULASKI

State  
VA

Zip Code  
24301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

09 / 21 / 2016

Transaction ID : SA11AL155154

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

425.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ESTES, MARK, , ,**

Mailing Address 5336 MINES RD

City  
PULASKI

State  
VA

Zip Code  
24301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y  
09 / 27 / 2016

Transaction ID : SA11AI.154000

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ESTWICK, JANAAN, , ,**

Mailing Address 1684 ALLARD AVENUE

City

GROSSE POINTE WOODS

State

MI

Zip Code

48236

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.155346

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. EVANS, ERIC, , ,**

Mailing Address 133 CODDINGTON PL

City

ODESSA

State

NY

Zip Code

14869

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TCAT IND.

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2016

Transaction ID : SA11AI.153607

Amount of Each Receipt this Period

144.00

☐ Memo Item

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

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

229.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FABER, JEFFREY, , ,**

Mailing Address 4379 READY

City  
SOUTH ROCKWOOD

State  
MI

Zip Code  
48179

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154040

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FEIRER, KEVIN, , ,**

Mailing Address 33923 FRASER AVE

City  
FRASER

State  
MI

Zip Code  
48026

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154188

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FIELDS-JACOBS, WENDY, , ,**

Mailing Address 2400 MARQUIS COURT

City  
ANN ARBOR

State  
MI

Zip Code  
48103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.154724

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

660.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FLOWERS, KISHA, , ,**

Mailing Address 18901 MENDOTA

City  
DETROIT

State  
MI

Zip Code  
48221

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154703

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FOLEY, JOHN, , ,**

Mailing Address 220 HIGHLAND RD APT 4

City

MASSENA

State

NY

Zip Code

13662

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.154455

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. FOSTER, MIGUEL, , ,**

Mailing Address 27875 BERKSHIRE DRIVE

City

SOUTHFIELD

State

MI

Zip Code

48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.153879

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

510.00

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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. FOX, GEORGE, , ,**

Mailing Address 3935 BETHLEHEM RD

City  
SPRINGFIELD

State  
TN

Zip Code  
37172

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.153756

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. FRANSETTA, ANTONIO, , ,**

Mailing Address 12059 SUNSET POINT CT

City  
WELLINGTON

State  
FL

Zip Code  
33414

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.154808

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GALLAGHER, CHRISTOP, , ,**

Mailing Address 15906 RYLAND

City  
REDFORD

State  
MI

Zip Code  
48239-3951

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.153694

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GAMBLE, RORY L, , ,**

Mailing Address 131 SAND BAR LANE

City  
DETROIT

State  
MI

Zip Code  
48214

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 08 / 2016

Transaction ID : SA11AI.155037

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GAMBRELL, KELVIN, , ,**

Mailing Address 601 ASHLEY AVE.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.155155

Amount of Each Receipt this Period

56.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GAMBRELL, KELVIN, , ,**

Mailing Address 601 ASHLEY AVE.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.155156

Amount of Each Receipt this Period

62.50

☐ Memo Item

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

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

418.75

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GAMBRELL, KELVIN, , ,

Mailing Address 601 ASHLEY AVE.

City  
SUFFOLKState  
VAZip Code  
23434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

418.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155157

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GATLIN, JAMES L, , ,

Mailing Address 924 CR 2644

City  
DECATURState  
TXZip Code  
76234FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLCOccupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154333

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GLANTON, ROBERT, , ,

Mailing Address 30425 OLD STREAM COURT

City  
SOUTHFIELDState  
MIZip Code  
48076FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAWOccupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : SA11AI.154509

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

391.25

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



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

Use separate schedule(s)  
for each category of the  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GODFREY-III, D, , ,

Mailing Address 3281 NIAGARA AVE

City  
CANTON

State  
MI

Zip Code  
48188

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.153841

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GOLDBETTER, LARRY, , ,

Mailing Address 822 OCEAN AVE.  
2C

City  
BROOKLYN

State  
NY

Zip Code  
11226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
NATIONAL WRITERS UNION

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.154995

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GOLDEN GUZMAN, RUTH, , ,

Mailing Address PO BOX 972213

City  
YPSILANTI

State  
MI

Zip Code  
48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 06 / 2016

Transaction ID : SA11AI.153534

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

900.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **GOODWIN, DARRYL, , ,**

Mailing Address 45465 GREENBRIAR

City  
VAN BUREN TWP

State  
MI

Zip Code  
48111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 08 / 2016

Transaction ID : SA11AI.154756

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **GORDISH, EDWARD, , ,**

Mailing Address 48626 THORNCROFT

City  
MACOMB

State  
MI

Zip Code  
48044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154324

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **GRANDBERRY, TODD, , ,**

Mailing Address 854 MENOMINEE

City  
PONTIAC

State  
MI

Zip Code  
48341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

396.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2016

Transaction ID : SA11AI.153711

Amount of Each Receipt this Period

99.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

459.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GRANDBERRY, TODD, , ,**

Mailing Address 854 MENOMINEE

City  
PONTIAC

State  
MI

Zip Code  
48341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

08 / 17 / 2016

Transaction ID : SA11AI.154331

Amount of Each Receipt this Period

99.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GRANDBERRY, TODD, , ,**

Mailing Address 854 MENOMINEE

City  
PONTIAC

State  
MI

Zip Code  
48341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.00

Date of Receipt

09 / 02 / 2016

Transaction ID : SA11AI.154481

Amount of Each Receipt this Period

99.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GRANDBERRY, TODD, , ,**

Mailing Address 854 MENOMINEE

City  
PONTIAC

State  
MI

Zip Code  
48341

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

654.00

Date of Receipt

09 / 30 / 2016

Transaction ID : SA11AI.154635

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

258.00

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. GRAY, JERRY, , ,

Mailing Address PO BOX 723

City  
SCOTTSVILLE

State  
TX

Zip Code  
75688-0723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

617.50

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 17 / 2016

Transaction ID : SA11AI.154783

Amount of Each Receipt this Period

167.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. GRAY, JERRY, , ,

Mailing Address PO BOX 723

City  
SCOTTSVILLE

State  
TX

Zip Code  
75688-0723

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

785.00

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.154340

Amount of Each Receipt this Period

167.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. GREEN, ANDRE, , ,

Mailing Address 5990 BAY HILL COURT

City  
ROMULUS

State  
MI

Zip Code  
48174

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y  
09 / 01 / 2016

Transaction ID : SA11AI.154349

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

635.00

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

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

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

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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. GREEN JR, RANDALL G, , ,**

Mailing Address 413 BROADWAY STREET

City  
MARINE CITY

State  
MI

Zip Code  
48039

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154869

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. GROVE, GARY, , ,**

Mailing Address 227 HAMPTON RD

City  
COLUMBIA

State  
TN

Zip Code  
38401-5044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.154235

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. GUCCIARDO, JOSEPH, , ,**

Mailing Address 22566 SILVER CREEK DRIVE

City  
WOODHAVEN

State  
MI

Zip Code  
48183

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.153693

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

660.00

# SCHEDULE A (FEC Form 3X)

## ITEMIZED RECEIPTS

Use separate schedule(s)  
for each category of the  
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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HALL, DEDIRA, , ,

Mailing Address 24055 SCOTIA RD

City  
OAK PARK

State  
MI

Zip Code  
48237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.155496

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARDING, PHILIP, , ,

Mailing Address 7411 Palo Verde Rd

City  
Irvine

State  
CA

Zip Code  
92617

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF CALIFORNIA

Occupation (for Individual)  
CLERICAL 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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154814

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARPER, JEREMY, , ,

Mailing Address 50489 PLAZA DR.

City  
MACOMB

State  
MI

Zip Code  
48042

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154966

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

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

180.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRIS, RANDY, , ,

Mailing Address 706 ERIC CT.

City  
SUFFOLK

State  
VA

Zip Code  
13434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.154875

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HARRIS, RANDY, , ,

Mailing Address 706 ERIC CT.

City  
SUFFOLK

State  
VA

Zip Code  
13434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154609

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HARRIS, RANDY, , ,

Mailing Address 706 ERIC CT.

City  
SUFFOLK

State  
VA

Zip Code  
13434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154876

Amount of Each Receipt this Period

31.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

143.75

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

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HARRISON, KELLI, , ,

Mailing Address 2105 MITCHELL

City  
EUREKA

State  
IL

Zip Code  
61530

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

700.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11AI.154922

Amount of Each Receipt this Period

220.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HAWKINS, STACY, , ,

Mailing Address 19335 FIELDING ST

City  
DETROIT

State  
MI

Zip Code  
48219-2528

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154816

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HAYES, LINDA, , ,

Mailing Address 21801 PARKLAWN

City  
OAK PARK

State  
MI

Zip Code  
48237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
07 / 28 / 2016

Transaction ID : SA11AI.154169

Amount of Each Receipt this Period

68.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

348.00

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



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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HAYES, LINDA, , ,**

Mailing Address 21801 PARKLAWN

City  
OAK PARK

State  
MI

Zip Code  
48237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y  
09 / 22 / 2016

**Transaction ID : SA11Al.153515**

Amount of Each Receipt this Period

136.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HAYES, LINDA, , ,**

Mailing Address 21801 PARKLAWN

City  
OAK PARK

State  
MI

Zip Code  
48237

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

408.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11Al.154880**

Amount of Each Receipt this Period

68.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HEARD, RODERICK, , ,**

Mailing Address 29883 FOX CLUB DRIVE

City  
FARMINGTON HILLS

State  
MI

Zip Code  
48331

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2016

**Transaction ID : SA11Al.155066**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

504.00

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HERNANDEZ, JOE, , ,

Mailing Address PO BOX 884

City  
DE SOTO

State  
TX

Zip Code  
75123-0884

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155038

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HILL, THOMAS, , ,

Mailing Address 1272 STEPHENS ST

City  
LILBURN

State  
GA

Zip Code  
30047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.155179

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HILL, THOMAS, , ,

Mailing Address 1272 STEPHENS ST

City  
LILBURN

State  
GA

Zip Code  
30047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11AI.155428

Amount of Each Receipt this Period

25.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

650.00

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

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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HILL, THOMAS, , ,

Mailing Address 1272 STEPHENS ST

City  
LILBURN

State  
GA

Zip Code  
30047

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.153834

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOFFREY, KARL, , ,

Mailing Address 6543 25TH AVE NE

City  
SEATTLE

State  
WA

Zip Code  
98115

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CALIFORNIA (UNIVERSITY OF)

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

495.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11AI.154837

Amount of Each Receipt this Period

110.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOLLER, CHARLES, , ,

Mailing Address 706 HIGHLAND DRIVE

City  
COFFEYVILLE

State  
KS

Zip Code  
67337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
DEERE & CO

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11AI.154529

Amount of Each Receipt this Period

100.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

285.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HOLMAN, NATHAN, , ,

Mailing Address 221 LINCOLN DR.

City  
PORT CLINTON

State  
OH

Zip Code  
43452

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11Al.154878

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HOLMES, GARY, , ,

Mailing Address 2320 S. TIBBS AVE.

City  
INDIANAPOLIS

State  
IN

Zip Code  
46241

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11Al.153727

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HOWELLS, FRANK, , ,

Mailing Address 762 SOVOCOOL HILL RD

City  
GROTON

State  
NY

Zip Code  
17073-9212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TOMPKINS CONSOLIDATED AREA TRA

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

287.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 21 / 2016

Transaction ID : SA11Al.153771

Amount of Each Receipt this Period

144.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

744.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. HUANG, EDEN, , ,

Mailing Address 58 SWAMPSCOTT ROAD

City  
STAMFORD

State  
CT

Zip Code  
06905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.155367

Amount of Each Receipt this Period

18.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. HUANG, EDEN, , ,

Mailing Address 58 SWAMPSCOTT ROAD

City  
STAMFORD

State  
CT

Zip Code  
06905

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155328

Amount of Each Receipt this Period

6.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. HUBER, ALTON, , ,

Mailing Address 543 MILLBROOK PKWY

City  
PICAYUNE

State  
MS

Zip Code  
39466

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE J. M. SMUCKER COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155204

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

75.00

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

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HURLEY, BRIAN, , ,**

Mailing Address 3900 MANNING RD

City  
DUNDEE

State  
NY

Zip Code  
14837-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

Transaction ID : SA11AI.154253

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURLEY, BRIAN, , ,**

Mailing Address 3900 MANNING RD

City  
DUNDEE

State  
NY

Zip Code  
14837-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11AI.154958

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. HURLEY, BRIAN, , ,**

Mailing Address 3900 MANNING RD

City  
DUNDEE

State  
NY

Zip Code  
14837-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

Transaction ID : SA11AI.154099

Amount of Each Receipt this Period

12.00

☐ Memo Item

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

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

108.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. HURLEY, BRIAN, , ,**

Mailing Address 3900 MANNING RD

City  
DUNDEE

State  
NY

Zip Code  
14837-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

09 / 21 / 2016

Transaction ID : SA11AI.153933

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. HURLEY, BRIAN, , ,**

Mailing Address 3900 MANNING RD

City  
DUNDEE

State  
NY

Zip Code  
14837-9355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.00

Date of Receipt

09 / 29 / 2016

Transaction ID : SA11AI.153768

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. IRVINE, DOUGLAS, , ,**

Mailing Address 725 DELMAR AVENUE

City  
GLEN BURNIE

State  
MD

Zip Code  
21061

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
RENAULT

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

08 / 29 / 2016

Transaction ID : SA11AI.154298

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

348.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 56 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACKSON, HAROLD, , ,**

Mailing Address 175 HARDING AVE

City  
STRATFORD

State  
CT

Zip Code  
06615

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.25

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2016

Transaction ID : SA11AI.155266

Amount of Each Receipt this Period

18.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACKSON, HAROLD, , ,**

Mailing Address 175 HARDING AVE

City  
STRATFORD

State  
CT

Zip Code  
06615

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

212.50

Date of Receipt

MM / DD / YYYY  
09 / 28 / 2016

Transaction ID : SA11AI.155295

Amount of Each Receipt this Period

6.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACKSON, WALTER, , ,**

Mailing Address 18357 W 13 MILE RD,APT 34

City  
SOUTHFIELD

State  
MI

Zip Code  
48076

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY  
09 / 30 / 2016

Transaction ID : SA11AI.155047

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

85.00



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

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

FOR LINE NUMBER: PAGE 57 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JACOBS, GERALD, , ,**

Mailing Address PO BOX 835

City  
FOREST FALLS

State  
CA

Zip Code  
92339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y Y  
08 / 17 / 2016

Transaction ID : SA11AI.153863

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JACOBS, GERALD, , ,**

Mailing Address PO BOX 835

City  
FOREST FALLS

State  
CA

Zip Code  
92339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 02 / 2016

Transaction ID : SA11AI.153532

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JACOBS, GERALD, , ,**

Mailing Address PO BOX 835

City  
FOREST FALLS

State  
CA

Zip Code  
92339

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154326

Amount of Each Receipt this Period

150.00

☐ Memo Item

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

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

300.00

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JAKES, JUSTIN, , ,**

Mailing Address 1301 ORLEANS APT 601E

City  
DETROIT

State  
MI

Zip Code  
48207

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154521

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JENKINS, DONALD, , ,**

Mailing Address 115 PARK PLACE DRIVE

City  
COVINGTON

State  
GA

Zip Code  
30016

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 22 / 2016

Transaction ID : SA11AI.153583

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JORDAN, KEN, , ,**

Mailing Address BOX 6197

City  
FORT WORTH

State  
TX

Zip Code  
76115-0197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
REYNOLDS METAL

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.153542

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

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

960.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. JORDAN, TRACY, , ,**

Mailing Address 407 LINDEN AVE.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

268.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.154442

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. JORDAN, TRACY, , ,**

Mailing Address 407 LINDEN AVE.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
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 Y  
09 / 23 / 2016

Transaction ID : SA11AI.155141

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. JORDAN, TRACY, , ,**

Mailing Address 407 LINDEN AVE.

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

381.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154595

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

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

143.75

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEATTS, BRANDON L, , ,**

Mailing Address 864 EAST LIBERTY STREET

City  
MILFORD

State  
MI

Zip Code  
48381

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.153876

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEE, JAMESELL, , ,**

Mailing Address 404 LONE OAK DRIVE

City  
ROCK HILL

State  
MO

Zip Code  
63119-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 17 / 2016

Transaction ID : SA11AI.154649

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEE, JAMESELL, , ,**

Mailing Address 404 LONE OAK DRIVE

City  
ROCK HILL

State  
MO

Zip Code  
63119-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

375.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.153882

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

450.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEE, JAMESELL, , ,**

Mailing Address 404 LONE OAK DRIVE

City  
ROCK HILL

State  
MO

Zip Code  
63119-1322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

525.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11Al.154784

Amount of Each Receipt this Period

150.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KEENUM, GENE, , ,**

Mailing Address 3819 PIPER BAY COVE

City  
LAKELAND

State  
TN

Zip Code  
38002

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11Al.154806

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KEGERREIS, LEIGH A, , ,**

Mailing Address 13750 OHIO STREET

City  
MONROE

State  
MI

Zip Code  
48161

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 16 / 2016

Transaction ID : SA11Al.154315

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

750.00

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KEGERREIS, LEIGH A, , ,**

Mailing Address 13750 OHIO STREET

City  
MONROE

State  
MI

Zip Code  
48161

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

305.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11Al.154614

Amount of Each Receipt this Period

5.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KERR, MICHAEL J, , ,**

Mailing Address 8112 SOUTHSORE DRIVE

City  
BRIGHTON

State  
MI

Zip Code  
48114

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : SA11Al.154942

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, ANTHONY, , ,**

Mailing Address 8043 BLISS

City  
DETROIT

State  
MI

Zip Code  
48234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

399.96

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2016

Transaction ID : SA11Al.155048

Amount of Each Receipt this Period

99.99

☐ Memo Item

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

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

404.99

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

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

FOR LINE NUMBER: PAGE 63 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, ANTHONY, , ,

Mailing Address 8043 BLISS

City  
DETROIT

State  
MI

Zip Code  
48234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

499.95

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 17 / 2016

Transaction ID : SA11Al.154793

Amount of Each Receipt this Period

99.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KING, ANTHONY, , ,

Mailing Address 8043 BLISS

City  
DETROIT

State  
MI

Zip Code  
48234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.94

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11Al.154507

Amount of Each Receipt this Period

99.99

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KING, ANTHONY, , ,

Mailing Address 8043 BLISS

City  
DETROIT

State  
MI

Zip Code  
48234

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

699.93

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.155049

Amount of Each Receipt this Period

99.99

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

299.97

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

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

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

FOR LINE NUMBER: PAGE 64 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KING, DUANA, , ,**

Mailing Address 18492 MANSFIELD

City  
DETROIT

State  
MI

Zip Code  
48235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.155146

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KING, DUANA, , ,**

Mailing Address 18492 MANSFIELD

City  
DETROIT

State  
MI

Zip Code  
48235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.154600

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KING, DUANA, , ,**

Mailing Address 18492 MANSFIELD

City  
DETROIT

State  
MI

Zip Code  
48235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.155007

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

180.00



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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. KING, JERRY, , ,

Mailing Address 3627 EAST MEADOWS CT

City  
OKEMOS

State  
MI

Zip Code  
48864

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.153935

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. KOHENSKEY, LARRY, , ,

Mailing Address 18 FIRELY

City  
TROY

State  
MO

Zip Code  
63379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154252

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. KOHENSKEY, PAMELA, , ,

Mailing Address 18 FIREFLY LANE

City  
TROY

State  
MO

Zip Code  
63379

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

380.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155309

Amount of Each Receipt this Period

380.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

740.00

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

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

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

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(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. KOLLMANN, ANITA, , ,**

Mailing Address 921 S 14TH ST

City  
MATTOON

State  
IL

Zip Code  
61938-5703

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MATTOON COMMUNITY SCHOOLS

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

612.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2016

Transaction ID : SA11AI.155523

Amount of Each Receipt this Period

612.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. KUNDRICK, MARK, , ,**

Mailing Address 2060 DUNWOODIE ST

City  
ORTONVILLE

State  
MI

Zip Code  
48462-8556

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y  
08 / 17 / 2016

Transaction ID : SA11AI.154191

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. KUNDRICK, MARK, , ,**

Mailing Address 2060 DUNWOODIE ST

City  
ORTONVILLE

State  
MI

Zip Code  
48462-8556

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.153866

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

732.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LAMBERT, JOHN, , ,**

Mailing Address 3322 MAJOR GRAHAMS ROAD

City  
MAX MEADOWS

State  
VA

Zip Code  
24360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.155283

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LAMBERT, JOHN, , ,**

Mailing Address 3322 MAJOR GRAHAMS ROAD

City  
MAX MEADOWS

State  
VA

Zip Code  
24360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2016

Transaction ID : SA11AI.155160

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LAMBERT, JOHN, , ,**

Mailing Address 3322 MAJOR GRAHAMS ROAD

City  
MAX MEADOWS

State  
VA

Zip Code  
24360

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.155313

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

150.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **LAMPE, DONALD, , ,**

Mailing Address 28501 FAWN RIVER RD

City  
STURGIS

State  
MI

Zip Code  
49091-8436

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.154090

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **LANTZ, ELAINE, , ,**

Mailing Address 818 ELSBETH ST

City  
DALLAS

State  
TX

Zip Code  
75208-4224

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LEGAL SERVICES FOR NEW YORK

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

312.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 15 / 2016

Transaction ID : SA11AI.153908

Amount of Each Receipt this Period

312.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **LATELY, KENNETH, , ,**

Mailing Address P.O. BOX 553

City  
NEWARK

State  
DE

Zip Code  
19715

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.153699

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

912.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. LAURIA, BONNIE, , ,

Mailing Address 3913 AMES ROAD

City  
WEST BRANCH

State  
MI

Zip Code  
48661

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11Al.154615

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. LEE, BRUCE ALLEN, , ,

Mailing Address 6500 S ROSEMEAD BLVD

City  
PICO RIVERA

State  
CA

Zip Code  
90660

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11Al.154944

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. LENZ, RONALD, , ,

Mailing Address 5921 N. OPPER LENTZ ROAD

City  
CURTICE

State  
OH

Zip Code  
43412

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNSON CONTROLS INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11Al.155059

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

1200.00

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

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, MICHAEL, , ,**

Mailing Address 5213 CONDOR STREET

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23462

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.155419

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LEWIS, MICHAEL, , ,**

Mailing Address 5213 CONDOR STREET

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23462

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

406.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.155501

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LEWIS, MICHAEL, , ,**

Mailing Address 5213 CONDOR STREET

City  
VIRGINIA BEACH

State  
VA

Zip Code  
23462

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

437.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155344

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

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

143.75

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LEWIS, RUBY, , ,**

Mailing Address 6334 WEBB ST

City  
DETROIT

State  
MI

Zip Code  
48204

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11Al.153703

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LLOYD, ALVIN, , ,**

Mailing Address 7712 TRAPPE ROAD

City  
BALTIMORE

State  
MD

Zip Code  
21222-2255

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 29 / 2016

Transaction ID : SA11Al.155041

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LOGAN, KEVIN, , ,**

Mailing Address 6238 UPPER RIDGE WAY

City  
ROSCOE

State  
IL

Zip Code  
61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

228.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2016

Transaction ID : SA11Al.154467

Amount of Each Receipt this Period

57.00

☐ Memo Item

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

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

427.00

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

Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 72 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. LOGAN, KEVIN, , ,**

Mailing Address 6238 UPPER RIDGE WAY

City  
ROSCOE

State  
IL

Zip Code  
61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

285.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

**Transaction ID : SA11AI.153857**

Amount of Each Receipt this Period

57.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. LOGAN, KEVIN, , ,**

Mailing Address 6238 UPPER RIDGE WAY

City  
ROSCOE

State  
IL

Zip Code  
61073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

342.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11AI.154177**

Amount of Each Receipt this Period

57.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. LUNDBERG, KRISTY, , ,**

Mailing Address 5 OAKTREE LN APT K

City  
WILLIAMSPORT

State  
MD

Zip Code  
21795-1242

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 22 / 2016

**Transaction ID : SA11AI.153887**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

414.00



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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MAPES JR, GEORGE, , ,**

Mailing Address 1082 BRIER CREEK RD

City  
MAMMOTH CAVE

State  
KY

Zip Code  
42259-7960

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.155019

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MARSHALL, HOMER, , ,**

Mailing Address 1016 HEATHERFIELD AVE

City  
ROSAMOND

State  
CA

Zip Code  
93560-6612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOEING COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

205.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.154034

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MARSHALL, HOMER, , ,**

Mailing Address 1016 HEATHERFIELD AVE

City  
ROSAMOND

State  
CA

Zip Code  
93560-6612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOEING COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

255.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154488

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 74 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MATHENEY, PEGGY, , ,**

Mailing Address 323 WOODCLIFF ROAD

City  
MONTEREY

State  
TN

Zip Code  
38574-1355

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FLEETGUARD, INC.

Occupation (for Individual)  
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 Y  
09 / 19 / 2016

Transaction ID : SA11AI.154785

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MAY, EDWARD, , ,**

Mailing Address 12560 PROMENADE

City  
DETROIT

State  
MI

Zip Code  
48213

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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  
09 / 30 / 2016

Transaction ID : SA11AI.153830

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MAYER, DYLAN H, , ,**

Mailing Address PO BOX 353350

City  
SEATTLE

State  
WA

Zip Code  
98195-3350

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
WASHINGTON (UNIVERSITY OF)

Occupation (for Individual)  
CLERICAL 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  
09 / 30 / 2016

Transaction ID : SA11AI.153767

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

420.00

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

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

FOR LINE NUMBER: PAGE 75 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCCLURG, BRYAN, , ,**

Mailing Address 21694 SR 115

City  
COLUMBUS GROVE

State  
OH

Zip Code  
45830

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.155442

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MCGARRIGLE, JASON, , ,**

Mailing Address 373 POOLE CIRCLE

City  
NEWFIELD

State  
NY

Zip Code  
14867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

264.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2016

Transaction ID : SA11AI.154254

Amount of Each Receipt this Period

36.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MCGARRIGLE, JASON, , ,**

Mailing Address 373 POOLE CIRCLE

City  
NEWFIELD

State  
NY

Zip Code  
14867

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

324.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11AI.154396

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

396.00

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

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

FOR LINE NUMBER: PAGE 76 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MCGARRIGLE, JASON, , ,

Mailing Address 373 POOLE CIRCLE

City  
NEWFIELDState  
NYZip Code  
14867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITYOccupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

336.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

Transaction ID : SA11AI.154255

Amount of Each Receipt this Period

12.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MCGARRIGLE, JASON, , ,

Mailing Address 373 POOLE CIRCLE

City  
NEWFIELDState  
NYZip Code  
14867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITYOccupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 21 / 2016

Transaction ID : SA11AI.153769

Amount of Each Receipt this Period

24.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MCGARRIGLE, JASON, , ,

Mailing Address 373 POOLE CIRCLE

City  
NEWFIELDState  
NYZip Code  
14867FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITYOccupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

384.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11AI.154100

Amount of Each Receipt this Period

24.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

60.00

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

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

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

FOR LINE NUMBER: PAGE 77 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MCKIVENS, MONICA A, , ,**

Mailing Address 6142 VAIL DRIVE

City  
YPSILANTI

State  
MI

Zip Code  
48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.154495

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MERREN, RICHARD, , ,**

Mailing Address 3915 E. PONTIAC ST.

City

FORT WAYNE

State

IN

Zip Code

46803

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 23 / 2016

Transaction ID : SA11AI.154810

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MERRITT, ERIC, , ,**

Mailing Address 5270 RAILVEIW CT APT.,222

City

SHELBY TWP.

State

MI

Zip Code

48316

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154305

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

660.00

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

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

FOR LINE NUMBER: PAGE 78 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. MIGLIA, MARGARET, , ,

Mailing Address 6778 CORRIGAN

City  
BRIGHTON

State  
MI

Zip Code  
48116-8851

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154115

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. MILLER, KC, , ,

Mailing Address 13790 STATE RT 120

City  
LYONS

State  
OH

Zip Code  
43533

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.155467

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. MILLS, WALTER R, , ,

Mailing Address 24250 JEROME ST

City  
OAK PARK

State  
MI

Zip Code  
48237-1612

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.154036

Amount of Each Receipt this Period

300.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

660.00

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

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

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

FOR LINE NUMBER: PAGE 79 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MINELLA, JOSEPH, , ,**

Mailing Address 1709 DUBLIN CT

City  
SPRING HILL

State  
TN

Zip Code  
37174-9506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 24 / 2016

Transaction ID : SA11AI.154067

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MOORE, JOHN, , ,**

Mailing Address 636 EAST ELM

City  
MONROE

State  
MI

Zip Code  
48162

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 17 / 2016

Transaction ID : SA11AI.153696

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MORGAN, RONALD, , ,**

Mailing Address 1450 WINDMOOR DR

City  
DUNEDIN

State  
FL

Zip Code  
34698

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.155260

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 80 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. MORRIS, VICTORIA, , ,**

Mailing Address 6601 POPLAR FOREST

City  
LOUISVILLE

State  
KY

Zip Code  
40291

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.153528

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. MURPHY, ANGIE, , ,**

Mailing Address 72 SPRUCE STREET, #4D

City  
STAMFORD

State  
CT

Zip Code  
06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.155366

Amount of Each Receipt this Period

18.75

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. MURPHY, ANGIE, , ,**

Mailing Address 72 SPRUCE STREET, #4D

City  
STAMFORD

State  
CT

Zip Code  
06902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
STAMFORD CITY OF

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

212.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155458

Amount of Each Receipt this Period

6.25

☐ Memo Item

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

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

325.00



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

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

FOR LINE NUMBER: PAGE 81 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEEDHAM, CHRISTENA, , ,**

Mailing Address 5080 PARK PLC DR

City  
HORN LAKE

State  
MS

Zip Code  
38637

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

303.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11AI.153513

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEEDHAM, CHRISTENA, , ,**

Mailing Address 5080 PARK PLC DR

City  
HORN LAKE

State  
MS

Zip Code  
38637

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.153835

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NEFF, KAREN, , ,**

Mailing Address 24425 DUNBRIDGE RD

City  
PERRYSBURG

State  
OH

Zip Code  
43551

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y Y  
08 / 15 / 2016

Transaction ID : SA11AI.155341

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

302.00

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

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

FOR LINE NUMBER: PAGE 82 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NEWBERRY, TROY, , ,**

Mailing Address 721 POST ST

City  
SAGINAW

State  
MI

Zip Code  
48602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
L3 COMMUNICATIONS

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 18 / 2016

Transaction ID : SA11AI.153920

Amount of Each Receipt this Period

65.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NEWBERRY, TROY, , ,**

Mailing Address 721 POST ST

City  
SAGINAW

State  
MI

Zip Code  
48602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
L3 COMMUNICATIONS

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

440.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.154937

Amount of Each Receipt this Period

130.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. NOE, GARY, , ,**

Mailing Address 1714 EASTWOOD DR

City  
BRUNSWICK

State  
OH

Zip Code  
44212-3918

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JACOBSON MFG COMPANY

Occupation (for Individual)  
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 Y  
08 / 29 / 2016

Transaction ID : SA11AI.155091

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

270.00

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

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

FOR LINE NUMBER: PAGE 83 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. NOEL, NATHAN, , ,**

Mailing Address 5905 ROBINHOOD LN

City  
LOUISVILLE

State  
KY

Zip Code  
40219-1421

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 29 / 2016

Transaction ID : SA11Al.154717

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. NOLEN, DARRYL, , ,**

Mailing Address 19640 NORTHBROOK DR

City  
SOUTHFIELD

State  
MI

Zip Code  
48076-5049

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2016

Transaction ID : SA11Al.154210

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. O'DONNELL, RICHARD, , ,**

Mailing Address 8493 STAMFORD

City  
YPSILANTI

State  
MI

Zip Code  
48198

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11Al.153839

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 84 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **OUTLAW, THOMAS, , ,**

Mailing Address 1306 N. FOREST OAK LANE

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.153831

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **OUTLAW, THOMAS, , ,**

Mailing Address 1306 N. FOREST OAK LANE

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154874

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **PACK, KEVIN, , ,**

Mailing Address 1000 WEST VIKING COURT

City  
ABINGDON

State  
MD

Zip Code  
21009

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154211

Amount of Each Receipt this Period

75.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

156.25

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

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

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

FOR LINE NUMBER: PAGE 85 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. **PAGAC, DAVID, , ,**

Mailing Address 16711 ROSA LANE

City  
SOUTHGATE

State  
MI

Zip Code  
48195

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11Al.154620

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. **PALMER JR, GEORGE, , ,**

Mailing Address 312 NORTH 41ST ST

City  
LOUISVILLE

State  
KY

Zip Code  
40212

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11Al.154217

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. **PARSONS, DAVID, , ,**

Mailing Address 9236 24TH AVE SW

City  
SEATTLE

State  
WA

Zip Code  
98106-2602

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNIVERSITY OF WASHINGTON

Occupation (for Individual)  
CLERICAL 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 Y  
09 / 30 / 2016

Transaction ID : SA11Al.154534

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

435.00

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

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

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

FOR LINE NUMBER: PAGE 86 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEDERSEN, ROBERT, , ,**

Mailing Address 11255 BRENTWOOD AVE

City  
ZIONSVILLE

State  
IN

Zip Code  
46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROLLS-ROYCE PLC

Occupation (for Individual)  
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 Y  
08 / 15 / 2016

Transaction ID : SA11AI.154321

Amount of Each Receipt this Period

510.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PEDERSEN, ROBERT, , ,**

Mailing Address 11255 BRENTWOOD AVE

City  
ZIONSVILLE

State  
IN

Zip Code  
46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROLLS-ROYCE PLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

615.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11AI.154621

Amount of Each Receipt this Period

52.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PEDERSEN, ROBERT, , ,**

Mailing Address 11255 BRENTWOOD AVE

City  
ZIONSVILLE

State  
IN

Zip Code  
46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROLLS-ROYCE PLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

667.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 09 / 2016

Transaction ID : SA11AI.154322

Amount of Each Receipt this Period

52.50

☐ Memo Item

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

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

615.00

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

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

FOR LINE NUMBER: PAGE 87 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PEDERSEN, ROBERT, , ,**

Mailing Address 11255 BRENTWOOD AVE

City  
ZIONSVILLE

State  
IN

Zip Code  
46077-9306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
ROLLS-ROYCE PLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

720.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

Transaction ID : SA11AI.153521

Amount of Each Receipt this Period

52.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. PELISSIER, DANIEL, , ,**

Mailing Address 14928 ENGLEWOOD AVE

City  
ALLEN PARK

State  
MI

Zip Code  
48101

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
08 / 23 / 2016

Transaction ID : SA11AI.155053

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PENDERGRASS, BOBBY, , ,**

Mailing Address 333 MOORE RD

City  
COOKEVILLE

State  
TN

Zip Code  
38506

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CUMMINS ENGINE

Occupation (for Individual)  
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 Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.154522

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

652.50

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

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

FOR LINE NUMBER: PAGE 88 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PETERSON, MARK, , ,**

Mailing Address 440 CHINQUAPIN TRL

City  
CHRISIANSBURG

State  
VA

Zip Code  
24073

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154815

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POET, GREGORY, , ,**

Mailing Address 25929 RUST

City  
NEW BOSTON

State  
MI

Zip Code  
48164

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.155055

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. POPE, TRACY, , ,**

Mailing Address 3808 11TH ST.

City  
ECORSE

State  
MI

Zip Code  
48229

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154934

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

385.00



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

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

FOR LINE NUMBER: PAGE 89 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. PORT, PAUL, , ,**

Mailing Address 4008 13TH ST

City  
MENOMINEE

State  
MI

Zip Code  
49858-1108

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JONES L E COMPANY

Occupation (for Individual)  
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 Y Y  
07 / 25 / 2016

Transaction ID : SA11AI.154653

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. POSEY, JAMES, , ,**

Mailing Address 6903 N WALNUT

City  
GLADSTONE

State  
MO

Zip Code  
64118-2516

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.153883

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. PULLIAM, JAMES, , ,**

Mailing Address 5324 SUMMER CIR

City  
IMPERIAL

State  
MO

Zip Code  
63052-2177

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COVIDIEN

Occupation (for Individual)  
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 Y  
09 / 19 / 2016

Transaction ID : SA11AI.154562

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

950.00

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

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

FOR LINE NUMBER: PAGE 90 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. PULLIAM, JAMES, , ,

Mailing Address 5324 SUMMER CIR

City  
IMPERIALState  
MOZip Code  
63052-2177FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
COVIDIENOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 22 / 2016

Transaction ID : SA11AI.153622

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. RAMIREZ, JESSE D, , ,

Mailing Address 12945 PEARBLOSSOM ST.

City  
HESPERIAState  
CAZip Code  
92344FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154291

Amount of Each Receipt this Period

56.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. REED, CLARENCE, , ,

Mailing Address P.O. BOX 7202

City  
ST. HTSState  
MIZip Code  
48311-7202FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154517

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

166.00

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

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

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

FOR LINE NUMBER: PAGE 91 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. REYNOLDS, MARVIN, , ,

Mailing Address 668 ADKINS CIRCLE

City  
SUFFOLKState  
VAZip Code  
23434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INCOccupation (for Individual)  
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 Y  
07 / 26 / 2016

Transaction ID : SA11AI.155015

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. REYNOLDS, MARVIN, , ,

Mailing Address 668 ADKINS CIRCLE

City  
SUFFOLKState  
VAZip Code  
23434FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INCOccupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

337.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.153832

Amount of Each Receipt this Period

87.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. RICE, TIFFANY, , ,

Mailing Address 29011 Brittany Ct

City  
RosevilleState  
MIZip Code  
48066-2043FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLCOccupation (for Individual)  
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 Y  
09 / 06 / 2016

Transaction ID : SA11AI.154030

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

172.50

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

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

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

FOR LINE NUMBER: PAGE 92 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

<b>A. RICE, TIFFANY, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 29011 Brittany Ct City Roseville State MI Zip Code 48066-2043 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) FCA US LLC Occupation (for Individual) FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 14 / 2016 <b>Transaction ID : SA11Al.154329</b> Amount of Each Receipt this Period 60.00 <input type="checkbox"/> Memo Item
<b>B. RICHARDS, JACQUET, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address P O BOX 80 City EASTPOINTE State MI Zip Code 48021 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) CHRYSLER LLC Occupation (for Individual) FACTORY WORKER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 30 / 2016 <b>Transaction ID : SA11Al.154212</b> Amount of Each Receipt this Period 60.00 <input type="checkbox"/> Memo Item
<b>C. RILEY, JOANNE, , ,</b> Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Mailing Address 11125 S.E. 97TH STREET City OKLAHOMA CITY State OK Zip Code 73165 FEC ID number of contributing federal political committee. C Name of Employer (for Individual) Occupation (for Individual) RETIRED Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1016.00			Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 28 / 2016 <b>Transaction ID : SA11Al.154555</b> Amount of Each Receipt this Period 1016.00 <input type="checkbox"/> Memo Item
<b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶			1136.00
<b>TOTAL</b> This Period (last page this line number only)..... ▶			

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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. RILEY, ROBERT, , ,**

Mailing Address 11125 SE 97TH ST

City  
OKLAHOMA CITY

State  
OK

Zip Code  
73165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

404.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154262

Amount of Each Receipt this Period

400.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROBINSON, D'URVILLE, , ,**

Mailing Address 23475 MICHELE CT.

City  
CLINTON TOWNSHIP

State  
MI

Zip Code  
48036

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154938

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROBISON, MICHAEL, , ,**

Mailing Address 42639 WINDING POND TRAIL

City  
BELLEVILLE

State  
MI

Zip Code  
48111

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.153691

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

760.00

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

Use separate schedule(s)  
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(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. ROBSON, CHRISTOPHER, , ,

Mailing Address 133 PHEASANT LANE

City  
GRAND BLANC

State  
MI

Zip Code  
48439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASCOTECH INC.

Occupation (for Individual)  
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 Y  
09 / 01 / 2016

Transaction ID : SA11AI.154049

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. ROBSON, CHRISTOPHER, , ,

Mailing Address 133 PHEASANT LANE

City  
GRAND BLANC

State  
MI

Zip Code  
48439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASCOTECH INC.

Occupation (for Individual)  
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 Y Y  
09 / 08 / 2016

Transaction ID : SA11AI.155045

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. ROBSON, CHRISTOPHER, , ,

Mailing Address 133 PHEASANT LANE

City  
GRAND BLANC

State  
MI

Zip Code  
48439

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
MASCOTECH INC.

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.153888

Amount of Each Receipt this Period

60.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

180.00

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

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

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

FOR LINE NUMBER: PAGE 95 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROGERS, JAMES, , ,**

Mailing Address 305 N DELAWARE AVENUE

City  
MARTINSBURG

State  
WV

Zip Code  
25401

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2016

Transaction ID : SA11AI.154613

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROMERO, TRACY, , ,**

Mailing Address 312 HILLCREST DRIVE

City  
TULLAHOMA

State  
TN

Zip Code  
37388

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2016

Transaction ID : SA11AI.154485

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROTENIZER, CHARLOTTE, , ,**

Mailing Address 5749 JONED DR.

City  
DUBLIN

State  
VA

Zip Code  
24084

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

MM / DD / YYYY  
09 / 27 / 2016

Transaction ID : SA11AI.154744

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

175.00

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

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

FOR LINE NUMBER: PAGE 96 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROTENIZER, KEITH, , ,**

Mailing Address PO BOX 412

City  
WYTHEVILLE

State  
VA

Zip Code  
24382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y Y  
09 / 21 / 2016

Transaction ID : SA11AI.154716

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. ROTENIZER, KEITH, , ,**

Mailing Address PO BOX 412

City  
WYTHEVILLE

State  
VA

Zip Code  
24382

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y  
09 / 27 / 2016

Transaction ID : SA11AI.153802

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. ROURKE, MICHAEL, , ,**

Mailing Address 11745 DEACON DR

City  
ROCKTON

State  
IL

Zip Code  
61072-9411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED TECHNOLOGIES CORP

Occupation (for Individual)  
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 Y  
09 / 20 / 2016

Transaction ID : SA11AI.154611

Amount of Each Receipt this Period

30.00

☐ Memo Item

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

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

80.00



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

Use separate schedule(s)  
for each category of the  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. ROURKE, MICHAEL, , ,**

Mailing Address 11745 DEACON DR

City  
ROCKTON

State  
IL

Zip Code  
61072-9411

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
UNITED TECHNOLOGIES CORP

Occupation (for Individual)  
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 Y  
09 / 28 / 2016

Transaction ID : SA11AI.154454

Amount of Each Receipt this Period

30.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. RUSSELL, ERNEST, , ,**

Mailing Address 1401 KALL INLA AVENUE

City  
HARTSHORNE

State  
OK

Zip Code  
74547

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
SPIRIT AEROSYSTEMS, INC

Occupation (for Individual)  
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 Y  
09 / 16 / 2016

Transaction ID : SA11AI.155348

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SALAZAR, HENRY, , ,**

Mailing Address 14317 VINCENT WAY

City  
ADELANTO

State  
CA

Zip Code  
92301

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.153734

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

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

160.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SANDERS, SHUNTE, , ,**

Mailing Address 4130 HILL DRIVE,APT. 203

City  
SHELBY TOWNSHIP

State  
MI

Zip Code  
48317

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.153999

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SARGENT, SONYA, , ,**

Mailing Address 19341 NADOL

City  
SOUTHFIELD

State  
MI

Zip Code  
48075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154328

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SAVAGE, THOMAS, , ,**

Mailing Address 204 CHERRY AVENUE

City  
COOKEVILLE

State  
TN

Zip Code  
38501-2522

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154051

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

170.00

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

Use separate schedule(s)  
for each category of the  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. SAWYER, STEVEN, , ,

Mailing Address 4633 MAPLEWOOD DRIVE

City  
SUFFOLK

State  
VA

Zip Code  
23435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.154163

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. SAWYER, STEVEN, , ,

Mailing Address 4633 MAPLEWOOD DRIVE

City  
SUFFOLK

State  
VA

Zip Code  
23435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
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 Y  
09 / 23 / 2016

Transaction ID : SA11AI.154873

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. SAWYER, STEVEN, , ,

Mailing Address 4633 MAPLEWOOD DRIVE

City  
SUFFOLK

State  
VA

Zip Code  
23435

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

387.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154001

Amount of Each Receipt this Period

31.25

☐ Memo Item

SUBTOTAL of Receipts This Page (optional)..... ►

143.75

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCHREIBER, MARC, , ,**

Mailing Address 46222 IMPERIAL LANE,MAIL BOX

City  
MACOMB TWP.

State  
MI

Zip Code  
48044

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154813

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SCHWARZ, MANFRED, , ,**

Mailing Address 7763 SOUTHAMPTON TER APT 1104

City  
TAMARAC

State  
FL

Zip Code  
33321-9120

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 29 / 2016

Transaction ID : SA11AI.155323

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SCOTT, NED, , ,**

Mailing Address 25146 CLIFFROSE STREET

City  
CORONA AREA

State  
CA

Zip Code  
92883

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BOEING

Occupation (for Individual)  
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 Y Y  
08 / 08 / 2016

Transaction ID : SA11AI.154498

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

660.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SCOTT III, CARL, , ,**

Mailing Address 430 BOYNE STREET

City  
NEW HUDSON

State  
MI

Zip Code  
48165

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155213

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHARPE, TERRY, , ,**

Mailing Address 3 SCHOOL ST  
PO BOX 283

City  
MCLEAN

State  
NY

Zip Code  
13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

360.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2016

Transaction ID : SA11AI.153599

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHARPE, TERRY, , ,**

Mailing Address 3 SCHOOL ST  
PO BOX 283

City  
MCLEAN

State  
NY

Zip Code  
13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

460.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2016

Transaction ID : SA11AI.153600

Amount of Each Receipt this Period

100.00

☐ Memo Item

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

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

200.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHARPE, TERRY, , ,**

Mailing Address 3 SCHOOL ST  
PO BOX 283

City  
MCLEAN

State  
NY

Zip Code  
13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 16 / 2016

Transaction ID : SA11AI.154686

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHARPE, TERRY, , ,**

Mailing Address 3 SCHOOL ST  
PO BOX 283

City  
MCLEAN

State  
NY

Zip Code  
13102

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CORNELL UNIVERSITY

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

520.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11AI.154544

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SHAW, VERNON, , ,**

Mailing Address 51765 CURTIS COURT

City  
NORTHVILLE

State  
MI

Zip Code  
48167

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.153686

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

360.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SHEPHERD, KENNETH, , ,**

Mailing Address 504 5TH STREET

City  
RADFORD

State  
VA

Zip Code  
24141

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
VOLVO (AB)

Occupation (for Individual)  
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 Y Y  
09 / 27 / 2016

Transaction ID : SA11Al.155314

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SHORTRIDGE, CASANDRA, , ,**

Mailing Address 10034 CHATHAM

City  
DETROIT

State  
MI

Zip Code  
48239

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11Al.154641

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SIMMONS, JERMAINE, , ,**

Mailing Address 404 HOLLOMAN AVE.

City  
AHOSKIE

State  
NC

Zip Code  
27910

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11Al.154164

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

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

356.25

**SCHEDULE A (FEC Form 3X)**  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SIMMONS, JERMAINE, , ,**

Mailing Address 404 HOLLOMAN AVE.

 City  
 AHOSKIE

 State  
 NC

 Zip Code  
 27910

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 KRAFT FOODS, INC

 Occupation (for Individual)  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.154749

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SIMMONS, JERMAINE, , ,**

Mailing Address 404 HOLLOMAN AVE.

 City  
 AHOSKIE

 State  
 NC

 Zip Code  
 27910

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 KRAFT FOODS, INC

 Occupation (for Individual)  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.154002

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, RONALD, , ,**

Mailing Address 3185 CURTIS RD

 City  
 BIRCH RUN

 State  
 MI

 Zip Code  
 48415-9021

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 GENERAL MOTORS CORPORATION

 Occupation (for Individual)  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.155022

Amount of Each Receipt this Period

☐ Memo Item

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, RONALD, , ,**

Mailing Address 3185 CURTIS RD

City  
BIRCH RUN

State  
MI

Zip Code  
48415-9021

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11AI.153695

Amount of Each Receipt this Period

55.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SMITH, SHIRLEY, , ,**

Mailing Address 705 MATTHEWS CT

City  
ARLINGTON

State  
TX

Zip Code  
76012

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
TEXTRON INCORPORATED

Occupation (for Individual)  
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 Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.154962

Amount of Each Receipt this Period

180.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SMITH, TIM, , ,**

Mailing Address 100 SHARPE POINTE COURT

City  
BOWLING GREEN

State  
KY

Zip Code  
42103

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.153755

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

310.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SMITH, VERNETHIA, , ,**

Mailing Address 39121 PRENTISS ST APT 302

City  
HARRISON TWP

State  
MI

Zip Code  
48045

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.154297

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLANDER, GEORGE, , ,**

Mailing Address PO BOX 597

City  
FLAT ROCK

State  
OH

Zip Code  
44828-0597

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BELLEVUE MFG CO

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.153895

Amount of Each Receipt this Period

50.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOLANDER, GEORGE, , ,**

Mailing Address PO BOX 597

City  
FLAT ROCK

State  
OH

Zip Code  
44828-0597

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BELLEVUE MFG CO

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154350

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

150.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOLANDER, GEORGE, , ,**

Mailing Address PO BOX 597

City  
FLAT ROCK

State  
OH

Zip Code  
44828-0597

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BELLEVUE MFG CO

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

Transaction ID : SA11AI.153896

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOLDATE, JIM ALLEN, , ,**

Mailing Address 1919 PURPLE SAGE WAY

City  
MANTECA

State  
CA

Zip Code  
95337

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154689

Amount of Each Receipt this Period

600.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOMMELLA, LARRY, , ,**

Mailing Address 272 HERITAGE ROAD

City  
CHAMBERSBURG

State  
PA

Zip Code  
17201

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.155046

Amount of Each Receipt this Period

75.00

☐ Memo Item

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

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

715.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SOMMERS, GERARD, , ,**

Mailing Address 69 FENTON RD

City  
ROCHESTER

State  
NY

Zip Code  
14624-3952

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 31 / 2016

Transaction ID : SA11AI.154313

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SOMMERVILLE, GARRY, , ,**

Mailing Address 28532 HENNEPIN ST

City  
GARDEN CITY

State  
MI

Zip Code  
48135-2875

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y Y  
08 / 24 / 2016

Transaction ID : SA11AI.154009

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SOTIL, RICARDO, , ,**

Mailing Address P.O. BOX 428

City  
EAST GRANBY

State  
CT

Zip Code  
06026-9575

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FLORIDA JAI-ALAI INC.

Occupation (for Individual)  
CLERICAL WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 09 / 2016

Transaction ID : SA11AI.155287

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. SPARKS, DANNY, , ,**

Mailing Address 5561 SADDLEBROOK DRIVE

City  
DOUGLASVILLE

State  
GA

Zip Code  
30135

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154316

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. SPRADLING, MARILYN, , ,**

Mailing Address 7505 BEL MAR DR.

City  
BELVIDERE

State  
IL

Zip Code  
61008

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

480.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 28 / 2016

Transaction ID : SA11AI.154240

Amount of Each Receipt this Period

20.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SPURLOCK, RONALD, , ,**

Mailing Address 103 SOUTH HAMPTON

City  
OAK LEAF

State  
TX

Zip Code  
75154-3847

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154907

Amount of Each Receipt this Period

600.00

☐ Memo Item

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

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

695.00

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

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STAHL, DONNA, , ,**

Mailing Address 2013 DOHACK DR.

City  
ARNOLD

State  
MO

Zip Code  
63010

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 28 / 2016

Transaction ID : SA11AI.155444

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STANLEY, STEVEN, , ,**

Mailing Address 2493 LONE EAGLE S.

City  
WOODBURY

State  
MN

Zip Code  
55129

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y  
08 / 18 / 2016

Transaction ID : SA11AI.153698

Amount of Each Receipt this Period

0.50

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STANLEY, STEVEN, , ,**

Mailing Address 2493 LONE EAGLE S.

City  
WOODBURY

State  
MN

Zip Code  
55129

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

250.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154617

Amount of Each Receipt this Period

0.50

☐ Memo Item

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

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

301.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STANLEY, STEVEN, , ,**

Mailing Address 2493 LONE EAGLE S.

City  
WOODBURY

State  
MN

Zip Code  
55129

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

251.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 29 / 2016

Transaction ID : SA11AI.153517

Amount of Each Receipt this Period

1.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STAUCH, DAVID, , ,**

Mailing Address 2665 LEWISBERRY RD

City  
YORK

State  
PA

Zip Code  
17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNSON CONTROLS INC

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.154920

Amount of Each Receipt this Period

40.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. STAUCH, DAVID, , ,**

Mailing Address 2665 LEWISBERRY RD

City  
YORK

State  
PA

Zip Code  
17404-1345

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNSON CONTROLS INC

Occupation (for Individual)  
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 Y  
09 / 27 / 2016

Transaction ID : SA11AI.155068

Amount of Each Receipt this Period

40.00

☐ Memo Item

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

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

81.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. STEWART JR, JAMES, , ,**

Mailing Address 21733 MT AETNA RD

City  
HAGERSTOWN

State  
MD

Zip Code  
21742

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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  
09 / 19 / 2016

Transaction ID : SA11AI.155085

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. STUDAKER, DAVID, , ,**

Mailing Address 4115 TRISTEN AV

City  
FORT GRATIOT

State  
MI

Zip Code  
48059

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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  
09 / 30 / 2016

Transaction ID : SA11AI.154189

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. SUTTON, CHARLES, , ,**

Mailing Address 129 WASHINGTON ST

City  
MOUNT CLEMENS

State  
MI

Zip Code  
48043-1603

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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  
09 / 30 / 2016

Transaction ID : SA11AI.153751

Amount of Each Receipt this Period

60.00

☐ Memo Item

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

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

420.00



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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, BENJAMIN, , ,**

Mailing Address 2167 CLIFTON WAY

City  
AVON

State  
OH

Zip Code  
44001

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 07 / 2016

Transaction ID : SA11AI.155500

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City

HIGHLAND PARK

State

MI

Zip Code

48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.20

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 15 / 2016

Transaction ID : SA11AI.154672

Amount of Each Receipt this Period

320.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City

HIGHLAND PARK

State

MI

Zip Code

48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

376.16

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 22 / 2016

Transaction ID : SA11AI.154361

Amount of Each Receipt this Period

24.96

☐ Memo Item

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

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

644.96

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City  
HIGHLAND PARK

State  
MI

Zip Code  
48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

394.88

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 29 / 2016

Transaction ID : SA11AI.154223

Amount of Each Receipt this Period

18.72

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City  
HIGHLAND PARK

State  
MI

Zip Code  
48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

426.08

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.155077

Amount of Each Receipt this Period

31.20

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City  
HIGHLAND PARK

State  
MI

Zip Code  
48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

451.04

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 19 / 2016

Transaction ID : SA11AI.153572

Amount of Each Receipt this Period

24.96

☐ Memo Item

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

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

74.88

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TAYLOR, JOE, , ,**

Mailing Address 214 RHODE ISLAND ST

City  
HIGHLAND PARK

State  
MI

Zip Code  
48203

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

476.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11AI.155078

Amount of Each Receipt this Period

24.96

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TAYLOR, TIMOTHY, , ,**

Mailing Address 4333 SULGRAVE

City  
SWARTZ CREEK

State  
MI

Zip Code  
48473

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154833

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. THIBEAULT, THOMAS, , ,**

Mailing Address 1908 OAK COURT

City  
POCAHONTAS

State  
AR

Zip Code  
72455

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 28 / 2016

Transaction ID : SA11AI.154754

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

384.96

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. THOMAS, ARTHUR, , ,**

Mailing Address 142 HANEY CIRCLE

City  
GAINESBORO

State  
TN

Zip Code  
38562-5546

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 27 / 2016

Transaction ID : SA11AI.154342

Amount of Each Receipt this Period

75.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. THOMPSON, TIFFANY, , ,**

Mailing Address 2420 23RD AVENUE A

City  
MOLINE

State  
IL

Zip Code  
61265-4136

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
BLACK HAWK COLLEGE

Occupation (for Individual)  
CLERICAL 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 Y  
09 / 28 / 2016

Transaction ID : SA11AI.153937

Amount of Each Receipt this Period

15.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TONEY, EVETTE, , ,**

Mailing Address 5244 REVEL ST

City  
NEW ORLEANS

State  
LA

Zip Code  
70129-1434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
THE J. M. SMUCKER COMPANY

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.153665

Amount of Each Receipt this Period

50.00

☐ Memo Item

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

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

140.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. TORRES, EDGAR, , ,**

Mailing Address 13381 WESLEY ST

 City  
 SOUTHGATE

 State  
 MI

 Zip Code  
 48195

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 INTERNATIONAL UNION, UAW

 Occupation (for Individual)  
 INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.154183

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. TORRES, EDGAR, , ,**

Mailing Address 13381 WESLEY ST

 City  
 SOUTHGATE

 State  
 MI

 Zip Code  
 48195

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 INTERNATIONAL UNION, UAW

 Occupation (for Individual)  
 INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.154891

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. TRIPLETT JR, VESTER, , ,**

Mailing Address 124 W 24TH ST

 City  
 WILMINGTON

 State  
 DE

 Zip Code  
 19802

 FEC ID number of contributing  
 federal political committee.

 Name of Employer (for Individual)  
 DAIMLERCHRYSLER

 Occupation (for Individual)  
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

 /  / 

Transaction ID : SA11AI.155279

Amount of Each Receipt this Period

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

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

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

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

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(check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. URAM, JOHN, , ,</b></p> <p>Mailing Address <b>22016 GENESIS COURT</b></p> <p>City <b>WOODHAVEN</b> State <b>MI</b> Zip Code <b>48183</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>INTERNATIONAL UNION, UAW</b> Occupation (for Individual) <b>INTERNATIONAL REPRESENTATIVE</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>300.00</b></p>			<p>Date of Receipt  <b>08 / 23 / 2016</b>  <b>Transaction ID : SA11AI.154637</b> </p> <p>Amount of Each Receipt this Period  <b>300.00</b> </p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. VAKOS, PAUL, , ,</b></p> <p>Mailing Address <b>81 SHADOW RIDGE RD</b></p> <p>City <b>STAMFORD</b> State <b>CT</b> Zip Code <b>06905</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>STAMFORD CITY OF</b> Occupation (for Individual) <b>CLERICAL WORKER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼         </p> <p>Aggregate Year-to-Date ▼ <b>206.25</b></p>			<p>Date of Receipt  <b>09 / 27 / 2016</b>  <b>Transaction ID : SA11AI.155432</b> </p> <p>Amount of Each Receipt this Period  <b>18.75</b> </p> <p><input type="checkbox"/> Memo Item</p>	
<p>Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. VAKOS, PAUL, , ,</b></p> <p>Mailing Address <b>81 SHADOW RIDGE RD</b></p> <p>City <b>STAMFORD</b> State <b>CT</b> Zip Code <b>06905</b></p> <p>FEC ID number of contributing federal political committee. <b>C</b></p> <p>Name of Employer (for Individual) <b>STAMFORD CITY OF</b> Occupation (for Individual) <b>CLERICAL WORKER</b></p> <p>Receipt For:  <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify)         </p> <p>Aggregate Year-to-Date ▼ <b>212.50</b></p>			<p>Date of Receipt  <b>09 / 28 / 2016</b>  <b>Transaction ID : SA11AI.155298</b> </p> <p>Amount of Each Receipt this Period  <b>6.25</b> </p> <p><input type="checkbox"/> Memo Item</p>	
<p><b>SUBTOTAL</b> of Receipts This Page (optional)..... ▶</p>			<p><b>325.00</b></p>	
<p><b>TOTAL</b> This Period (last page this line number only)..... ▶</p>			<p></p>	

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

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. VERDIER, WILLIAM, , ,**

Mailing Address 4409 HUCKLEBERRY LANE

City  
FLINT

State  
MI

Zip Code  
48507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 01 / 2016

Transaction ID : SA11AI.154301

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. VERDIER, WILLIAM, , ,**

Mailing Address 4409 HUCKLEBERRY LANE

City  
FLINT

State  
MI

Zip Code  
48507

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 08 / 2016

Transaction ID : SA11AI.154601

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WAGNER, STANLEY, , ,**

Mailing Address 401 4TH ST

City  
HANOVER

State  
PA

Zip Code  
17331-2123

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
JOHNSON CONTROLS INC

Occupation (for Individual)  
RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

Transaction ID : SA11AI.154387

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

420.00

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

Use separate schedule(s)  
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WAHHAB, SHAAKIR, , ,**

Mailing Address PO BOX 361251

City  
GROSSE POINTE FARMS

State  
MI

Zip Code  
48236-1251

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.154628

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WALKER, CALVIN, , ,**

Mailing Address 18970 LAUDER

City  
DETROIT

State  
MI

Zip Code  
48235

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FCA US LLC

Occupation (for Individual)  
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 Y  
09 / 30 / 2016

Transaction ID : SA11AI.155416

Amount of Each Receipt this Period

60.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WALLACE, TERRY, , ,**

Mailing Address 412 WEBB STREET

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

281.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 26 / 2016

Transaction ID : SA11AI.154451

Amount of Each Receipt this Period

31.25

☐ Memo Item

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

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

151.25



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

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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. WALLACE, TERRY, , ,

Mailing Address 412 WEBB STREET

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

362.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11Al.153683

Amount of Each Receipt this Period

81.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. WALLACE, TERRY, , ,

Mailing Address 412 WEBB STREET

City  
SUFFOLK

State  
VA

Zip Code  
23434

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

393.75

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

Transaction ID : SA11Al.154748

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. WATERWALL, NICK, , ,

Mailing Address 110 JOHN DR

City  
SLIDELL

State  
LA

Zip Code  
70461-1824

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
LOCKHEED MARTIN CORPORATION

Occupation (for Individual)  
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 Y  
09 / 23 / 2016

Transaction ID : SA11Al.154374

Amount of Each Receipt this Period

50.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

162.50

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

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

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATKINS, SANDRA, , ,**

Mailing Address 4406 HUNT CLUB DRIVE,APT 1B

City  
YPSILANTI

State  
MI

Zip Code  
48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
07 / 28 / 2016

**Transaction ID : SA11AI.154184**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WATKINS, SANDRA, , ,**

Mailing Address 4406 HUNT CLUB DRIVE,APT 1B

City  
YPSILANTI

State  
MI

Zip Code  
48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
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 Y  
08 / 17 / 2016

**Transaction ID : SA11AI.155027**

Amount of Each Receipt this Period

70.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WATKINS, SANDRA, , ,**

Mailing Address 4406 HUNT CLUB DRIVE,APT 1B

City  
YPSILANTI

State  
MI

Zip Code  
48197

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
CHRYSLER LLC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

420.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

**Transaction ID : SA11AI.153859**

Amount of Each Receipt this Period

70.00

☐ Memo Item

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

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

210.00

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

Use separate schedule(s)  
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☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WATSON, DONALD, , ,**

Mailing Address 2304 HWY. B

City  
POPLAR BLUFF

State  
MO

Zip Code  
63902

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 19 / 2016

Transaction ID : SA11AI.154293

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHEELER, PHILIP, , ,**

Mailing Address MIDDLE HADDAM ROAD BOX 132

City  
MIDDLE HADDAM

State  
CT

Zip Code  
06456-0132

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
08 / 09 / 2016

Transaction ID : SA11AI.154652

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITAKER, DENEEN L, , ,**

Mailing Address 6853 ALDERLEY WAY

City  
WEST BLOOMFIELD

State  
MI

Zip Code  
48322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 23 / 2016

Transaction ID : SA11AI.154458

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

900.00

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

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

FOR LINE NUMBER: PAGE 124 OF 191  
(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 of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITED, MICHAEL, , ,**

Mailing Address 28333 GRIX RD

City  
NEW BOSTON

State  
MI

Zip Code  
48164-9493

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 24 / 2016

Transaction ID : SA11AI.154902

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WHITEHEAD, RONALD, , ,**

Mailing Address PO BOX 1302

City  
FRANKLIN

State  
VA

Zip Code  
23851-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
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 Y  
07 / 26 / 2016

Transaction ID : SA11AI.154984

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WHITEHEAD, RONALD, , ,**

Mailing Address PO BOX 1302

City  
FRANKLIN

State  
VA

Zip Code  
23851-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

353.25

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 23 / 2016

Transaction ID : SA11AI.154578

Amount of Each Receipt this Period

81.25

☐ Memo Item

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

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

412.50

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WHITEHEAD, RONALD, , ,**

Mailing Address PO BOX 1302

City  
FRANKLIN

State  
VA

Zip Code  
23851-9679

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
KRAFT FOODS, INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

384.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA11Al.153960**

Amount of Each Receipt this Period

31.25

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILLIAMS, MARK, , ,**

Mailing Address 12987 MATTHEWS

City  
CARLETON

State  
MI

Zip Code  
48117

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 07 / 2016

**Transaction ID : SA11Al.154186**

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILLIAMS, W, , ,**

Mailing Address 139 LINKS LN

City  
WATERLOO

State  
IL

Zip Code  
62298-1588

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENERAL MOTORS CORPORATION

Occupation (for Individual)  
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 Y Y  
09 / 28 / 2016

**Transaction ID : SA11Al.154042**

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

631.25

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, JAMES, , ,**

Mailing Address 7448 SUNNYBRAE AVE

City  
CANOGA PARK

State  
CA

Zip Code  
91306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENCORP INC

Occupation (for Individual)  
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 Y Y  
09 / 09 / 2016

**Transaction ID : SA11AI.155202**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JAMES, , ,**

Mailing Address 7448 SUNNYBRAE AVE

City  
CANOGA PARK

State  
CA

Zip Code  
91306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENCORP INC

Occupation (for Individual)  
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 Y  
09 / 20 / 2016

**Transaction ID : SA11AI.155095**

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WILSON, JAMES, , ,**

Mailing Address 7448 SUNNYBRAE AVE

City  
CANOGA PARK

State  
CA

Zip Code  
91306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENCORP INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

275.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 20 / 2016

**Transaction ID : SA11AI.155249**

Amount of Each Receipt this Period

25.00

☐ Memo Item

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

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

75.00

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

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

FOR LINE NUMBER: PAGE 127 OF 191

(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WILSON, JAMES, , ,**

Mailing Address 7448 SUNNYBRAE AVE

City  
CANOGA PARK

State  
CA

Zip Code  
91306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENCORP INC

Occupation (for Individual)  
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 Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.154682

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WILSON, JAMES, , ,**

Mailing Address 7448 SUNNYBRAE AVE

City  
CANOGA PARK

State  
CA

Zip Code  
91306

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
GENCORP INC

Occupation (for Individual)  
FACTORY WORKER

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2016

Transaction ID : SA11AI.155332

Amount of Each Receipt this Period

25.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WOODALL, BECKY, , ,**

Mailing Address 536 SADDLEHORN DRIVE

City  
CHESAPEAKE

State  
VA

Zip Code  
23322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
09 / 19 / 2016

Transaction ID : SA11AI.154582

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

350.00

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

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

FOR LINE NUMBER: PAGE 128 OF 191  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WOODALL, JAMES, , ,**

Mailing Address 536 SADDLEHORN DRIVE

City  
CHESAPEAKE

State  
VA

Zip Code  
23322

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
FORD MOTOR COMPANY

Occupation (for Individual)  
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 Y  
 09 / 19 / 2016

Transaction ID : SA11Al.154082

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B. WOOLMAN, MICHAEL, , ,**

Mailing Address 8352 MCKINLEY

City  
CENTER LINE

State  
MI

Zip Code  
48015

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 08 / 24 / 2016

Transaction ID : SA11Al.154936

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C. WRIGHT, JOHN, , ,**

Mailing Address 49474 WHISKEY LANE

City  
TICKFAW

State  
LA

Zip Code  
70466

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)  
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 Y  
 09 / 19 / 2016

Transaction ID : SA11Al.155211

Amount of Each Receipt this Period

300.00

☐ Memo Item

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

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

850.00



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

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

FOR LINE NUMBER: PAGE 129 OF 191

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**A. WYATT, OTEN, , ,**

Mailing Address 24310 WEST NORWOOD STREET

City  
SOUTHFIELD

State  
MI

Zip Code  
48075

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)  
INTERNATIONAL UNION, UAW

Occupation (for Individual)  
INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 02 / 2016

Transaction ID : SA11Al.154787

Amount of Each Receipt this Period

300.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**B.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

**C.**

Mailing Address

City

State

Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

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

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

300.00

58901.06

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7343.07

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2016

**Transaction ID : SA17.155525**

Amount of Each Receipt this Period

964.58

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7352.30

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2016

**Transaction ID : SA17.155529**

Amount of Each Receipt this Period

9.23

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

7482.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2016

**Transaction ID : SA17.155532**

Amount of Each Receipt this Period

129.91

☐ Memo Item

INTEREST ON CHECKING

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

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

1103.72

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

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

FOR LINE NUMBER: PAGE 131 OF 191  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

7506.50

Date of Receipt

M M / D D / Y Y Y Y Y Y  
07 / 31 / 2016

**Transaction ID : SA17.155535**

Amount of Each Receipt this Period

24.29

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8367.69

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

**Transaction ID : SA17.155526**

Amount of Each Receipt this Period

861.19

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

8385.32

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

**Transaction ID : SA17.155530**

Amount of Each Receipt this Period

17.63

☐ Memo Item

INTEREST ON CHECKING

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

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

903.11

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8495.18

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

**Transaction ID : SA17.155533**

Amount of Each Receipt this Period

109.86

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

8517.27

Date of Receipt

M M / D D / Y Y Y Y Y Y  
08 / 31 / 2016

**Transaction ID : SA17.155536**

Amount of Each Receipt this Period

22.09

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9293.17

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA17.155527**

Amount of Each Receipt this Period

775.90

☐ Memo Item

INTEREST ON CHECKING

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

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

907.85

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

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

FOR LINE NUMBER: PAGE 133 OF 191  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **A. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9329.99

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA17.155531**

Amount of Each Receipt this Period

36.82

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **B. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

9405.71

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA17.155534**

Amount of Each Receipt this Period

75.72

☐ Memo Item

INTEREST ON CHECKING

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

## **C. JPMORGAN CHASE**

Mailing Address 611 WOODWARD

City  
DETROIT

State  
MI

Zip Code  
48226

FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Occupation (for Individual)

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

9427.21

Date of Receipt

M M / D D / Y Y Y Y Y Y  
09 / 30 / 2016

**Transaction ID : SA17.155537**

Amount of Each Receipt this Period

21.50

☐ Memo Item

INTEREST ON CHECKING

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

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

134.04

3048.72

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 134 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. ABC MAILING INC.**Mailing Address 1725 E. 14 MILE  
SUITE 120City  
TROYState  
MIZip Code  
48083-4600Purpose of Disbursement  
MAILING/RETIREE VCAP TICKETS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2016

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

8770.62

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ADELMAN VACATIONS**

Mailing Address 11457 OLIVE BLVD.

City  
ST. LOUISState  
MOZip Code  
63141Purpose of Disbursement  
REG5 2015 VCAP PRIZE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		12		2016

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

3300.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALBRO, GEORGE, , ,**

Mailing Address 431 7TH ST.

City  
BROOKLYNState  
NYZip Code  
11215-3634Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C****Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

2639.92

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

14710.54

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 135 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. ALLIED UNION SERVICES**

Mailing Address 240 N. FENWAY DRIVE

City  
FENTONState  
MIZip Code  
48430Purpose of Disbursement  
POSTAGE/ADDRESS CANDIDATE MAIL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15336**

Amount of Each Disbursement this Period

24750.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMERICAN GRAPHICS PRINTING COMPANY**

Mailing Address 34895 GROESBECK

City  
CLINTON TWP.State  
MIZip Code  
48035Purpose of Disbursement  
2 PART V CAP ORDER FORM

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15332**

Amount of Each Disbursement this Period

225.78

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMERICAN TIME MANUFACTURING, LTD.**

Mailing Address 1600 NORTH CLINTON AVE.

City  
ROCHESTERState  
NYZip Code  
14621Purpose of Disbursement  
REPAIR/CLEAN VCAP WATCHES

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15332**

Amount of Each Disbursement this Period

41.75

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

25017.53

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. AMERICAN TIME MANUFACTURING, LTD.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Mailing Address 1600 NORTH CLINTON AVE.

City  
ROCHESTERState  
NYZip Code  
14621Purpose of Disbursement  
REPAIR/VCAP WATCH

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

29.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AMY'S CATERING**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Mailing Address 600 WEST SAGINAW STREET

City  
LANSINGState  
MIZip Code  
48933Purpose of Disbursement  
R1D CANDIDATE SCREEN

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

402.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AMY'S CATERING**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		02		2016

Mailing Address 600 WEST SAGINAW STREET

City  
LANSINGState  
MIZip Code  
48933Purpose of Disbursement  
R1D CANDIDATE SCREEN

Candidate Name

Category/  
Type
 Office Sought: ☐ House  
☐ Senate  
☐ President

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

State: District:

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

80.53

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

512.98



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. ASBERRY, PAKITA, , ,**

Mailing Address 617 NW 118TH STREET

City  
OKLAHOMA CITYState  
OKZip Code  
73114Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15336**

Amount of Each Disbursement this Period

1735.80

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. AT&T MOBILITY**

Mailing Address PO BOX 9004

City  
CAROL STREAMState  
ILZip Code  
60197-9004Purpose of Disbursement  
PHONE BANKING  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			0	2			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

512.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. AT&T MOBILITY**

Mailing Address PO BOX 9004

City  
CAROL STREAMState  
ILZip Code  
60197-9004Purpose of Disbursement  
PHONE BANKING  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			1	2			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15330**

Amount of Each Disbursement this Period

1396.79

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3644.59

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. BARTLETT, JOHN, , ,**

Mailing Address 5341 CHEVIOT PLACE

City  
INDIANAPOLISState  
INZip Code  
46226Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

2872.27

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BATEMAN, KURTISE, , ,**

Mailing Address 498 ENFIELD RD

City  
COLUMBUSState  
OHZip Code  
43209-2254Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C****Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

678.95

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BENCHICH, ALAN, , ,**

Mailing Address 1437 W. MARSHALL

City  
FERNDALState  
MIZip Code  
48220Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

2305.15

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ▶**TOTAL** This Period (last page this line number only)..... ▶

5856.37

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. BIRCHFIELD, RONALD, , ,**

Mailing Address 4824 OAK GLEN DR

City  
TOLEDOState  
OHZip Code  
43613Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

 724.25☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BOWMAN, JOHN, , ,**Mailing Address 1143 S PLYMOUTH CT  
UNIT 20City  
CHICAGOState  
ILZip Code  
60605-2061Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

 717.59☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BRADY III, HERBERT, , ,**

Mailing Address 5742 STONELICK WILLIAMS CORNER

City  
BATAVIAState  
OHZip Code  
45103Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

 657.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 2098.84

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. BUFORD, MARK, , ,**

Mailing Address 3 ST. ANDREWS

City  
TEMPERANCEState  
MIZip Code  
48182Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		13		2016

FEC Identification Number

**C****Transaction ID : SB21B.15329**

Amount of Each Disbursement this Period

2125.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. BUFORD, MARK, , ,**

Mailing Address 3 ST. ANDREWS

City  
TEMPERANCEState  
MIZip Code  
48182Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

742.50

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CALHOUN, JUDY, , ,**

Mailing Address 3101 SEXTON

City  
NORMANState  
OKZip Code  
73026Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		26		2016

FEC Identification Number

**C****Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

1904.30

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

4771.80

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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☒ 21b    ☐ 22    ☐ 23    ☐ 26    ☐ 27  
☐ 28a    ☐ 28b    ☐ 28c    ☐ 29    ☐ 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. CESCAPHÉ EVENT GROUP**

Mailing Address 925 N. 2ND STREET

City  
PHILADELPHIAState  
PAZip Code  
19123Purpose of Disbursement  
UAW DNC RECEPTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	7				2	0					2	0	1	6

FEC Identification Number

**C** 

Transaction ID : SB21B.15329

Amount of Each Disbursement this Period

 7500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHIC PRODUCTIONS, LLC**

Mailing Address 5614 CONNECTICUT AVE., NW #176

City  
WASHINGTONState  
DCZip Code  
20015Purpose of Disbursement  
CO HOST 2016 CBC RECEPTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	9				0	8					2	0	1	6

FEC Identification Number

**C** 

Transaction ID : SB21B.15333

Amount of Each Disbursement this Period

 10000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CLARENCE H. JOHNSON, P.C.**Mailing Address P O BOX 427  
26212 WOODWARD AVENUECity  
ROYAL OAKState  
MIZip Code  
48068-0427Purpose of Disbursement  
2015 TAX PREP/AUDIT

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y	
0	8				3	1					2	0	1	6

FEC Identification Number

**C** 

Transaction ID : SB21B.15332

Amount of Each Disbursement this Period

 5644.10☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 23144.10

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. COLLINS, DOUGLAS, , ,**

Mailing Address 205 FENWAY DRIVE

City  
LIMAState  
OHZip Code  
45804Purpose of Disbursement  
UNCASHED VCAP PRIZE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2016

FEC Identification Number

**C****Transaction ID : SB21B.15553**

Amount of Each Disbursement this Period

-100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COPELAND, TERRY, , ,**

Mailing Address 407 BOURBEUSE RD.

City  
UNIONState  
MOZip Code  
63084Purpose of Disbursement  
R5 VCAP 2015 PRIZE WINNERS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

FEC Identification Number

**C****Transaction ID : SB21B.15331**

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DORNBOS PRINTING**

Mailing Address 1131 E. GENESSE AVENUE

City  
SAGINAWState  
MIZip Code  
48607Purpose of Disbursement  
POSTCARDS SAGINAW/BAY CITY

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		12		2016

FEC Identification Number

**C****Transaction ID : SB21B.15331**

Amount of Each Disbursement this Period

1672.97

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1822.97

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. EDWARDS, YVONNE, , ,**

Mailing Address 608 REGALWOOD DR

City  
DE SOTOState  
TXZip Code  
75115-4690Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C** Transaction ID : SB21B.15334

Amount of Each Disbursement this Period

3558.11

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. EUSANIO, KAREN, , ,**

Mailing Address 1778 CHERRY LANE

City  
HUBBARDState  
OHZip Code  
44425Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

FEC Identification Number

**C** Transaction ID : SB21B.15334

Amount of Each Disbursement this Period

2927.14

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GLADUE, DENISE, , ,**

Mailing Address 44 COOK DR.

City  
UNCASVILLEState  
CTZip Code  
06382-1314Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

**C** Transaction ID : SB21B.15334

Amount of Each Disbursement this Period

2657.31

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

9142.56

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 144 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. GRAY, J D, , ,**

Mailing Address 721 DUNN ROAD

City  
HAZELWOODState  
MOZip Code  
63042Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C****Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

691.08

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HELMS, WENDELL, , ,**

Mailing Address 1002 E. MARVIN

City  
WAXAHACHIEState  
TXZip Code  
75165Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C****Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

3629.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. HUDDLESTON, KEVIN, , ,**

Mailing Address 224 SYCAMORE ST

City  
LEBANONState  
TNZip Code  
37087-2818Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C****Transaction ID : SB21B.15337**

Amount of Each Disbursement this Period

2458.02

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

6778.30



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. HURD, GENE, , ,**

Mailing Address 1509 S. VALLEY CENTER AVE.

City  
GLENORAState  
CAZip Code  
91740Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	6			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.15337

Amount of Each Disbursement this Period

4358.30

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INTERNATIONAL UNION, UAW**

Mailing Address 8000 EAST JEFFERSON AVENUE

City  
DETROITState  
MIZip Code  
48214Purpose of Disbursement  
REIMB CK#1649089 CESCAPHÉ EVENT-DNC  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			2	5			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.15331

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JASON BARLOW**

Mailing Address 867 WHITE OAK DRIVE

City  
SPRINGFIELDState  
OHZip Code  
45504Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			1	5			2	0	1	6		

FEC Identification Number

**C**

Transaction ID : SB21B.15325

Amount of Each Disbursement this Period

2125.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

10483.30

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. JASON BARLOW**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	6		

Mailing Address 867 WHITE OAK DRIVE

City  
SPRINGFIELDState  
OHZip Code  
45504Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

631.35

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. KANZLEITER, JOE, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				0	9		2	0	1	6		

Mailing Address N85W17004 ANN AVE.

City  
MENOMONEE FALLSState  
WIZip Code  
53051Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

2859.55

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. KUSHNER, JULIE, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				0	2		2	0	1	6		

Mailing Address 75 OLD RIDGEBURY ROAD

City  
DANBURYState  
CTZip Code  
06810-7234Purpose of Disbursement  
REIMB FOR CONTRIBUTION TO CT DEMOCRATIC PARTY  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

258.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

3748.90

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. MACK, JIMMY, , ,**

Mailing Address 406 SWANRIDGE DR.

City  
DUNCANVILLEState  
TXZip Code  
75137Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C****Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

3652.03

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MARRERO, ROLANDO, , ,**

Mailing Address 1749 ETHAN LANE

City  
BRENTWOODState  
TNZip Code  
37027Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C****Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

2409.64

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MCCARTY, SONIA, , ,**

Mailing Address 617 COLD CREEK BLVD.

City  
SANDUSKYState  
OHZip Code  
44870Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

**C****Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

923.20

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6984.87

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. MELSON, JAMES MIKE, , ,**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

Mailing Address 1395 EAST PEARCE BLVD.

City  
WENTZVILLEState  
MOZip Code  
63385Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15336**

Amount of Each Disbursement this Period

675.14

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. MICHIGAN DEMOCRATIC PARTY/**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	0			2	0	1	6		

Mailing Address 606 TOWNSEND

City  
LANSINGState  
MIZip Code  
48933Purpose of Disbursement  
LODGING DNC LABOR MTG  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15329**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. MICHIGAN DEMOCRATIC PARTY/**

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	6		

Mailing Address 606 TOWNSEND

City  
LANSINGState  
MIZip Code  
48933Purpose of Disbursement  
VOID NOT ENTITLED CK #35380 DATED 06/28/16  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15554**

Amount of Each Disbursement this Period

-10000.00

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

-4324.86

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. MISSOURI BUSINESS FORMS**

Mailing Address 14585 MANCHESTER ROAD

City  
BALLWINState  
MOZip Code  
63011Purpose of Disbursement  
TICS/VCAP CRUISE PRIZE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.15336**

Amount of Each Disbursement this Period

 5491.88☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MOYE, LEW, , ,**

Mailing Address 4472 BIRCHER BLVD.

City  
ST. LOUISState  
MOZip Code  
63115Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

FEC Identification Number

**C** **Transaction ID : SB21B.15334**

Amount of Each Disbursement this Period

 1523.42☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. OHIO DEMOCRATIC PARTY**

Mailing Address 340 E. FULTON ST.

City  
COLUMBUSState  
OHZip Code  
43215Purpose of Disbursement  
CONTRIBUTION FOR A DELEGATE ATTENDING NATIONAL  
CONVENTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	7			2	1			2	0	1	6		

FEC Identification Number

**C** C00016899**Transaction ID : SB21B.15325**

Amount of Each Disbursement this Period

 2125.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 9140.30

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. PORTELL, GARY, , ,**

Mailing Address 14773 STATE ROUTE M

City  
STE. GENEVIEVEState  
MOZip Code  
63670Purpose of Disbursement  
R5 VCAP 2016 PRIZE WINNERS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

FEC Identification Number

**C****Transaction ID : SB21B.15331**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. PRECISION COMMUNICATIONS ENTERPRISES,**

Mailing Address PO BOX 7335

City  
SILVER SPRINGState  
MDZip Code  
20907Purpose of Disbursement  
AUTOMATED CALLS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

FEC Identification Number

**C****Transaction ID : SB21B.15336**

Amount of Each Disbursement this Period

1012.24

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PREZELSKI, TOM, , ,**

Mailing Address PO BOX 548

City  
TUCSONState  
AZZip Code  
85702Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

3573.45

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5085.69

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 151 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. QUICK MADE AWARDS, LLC**

Mailing Address 4600 E. 9 MILE ROAD

City  
WARRENState  
MIZip Code  
48091Purpose of Disbursement  
AWARDS/2015 VCAP WINNERS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

FEC Identification Number

**C**

Transaction ID : SB21B.15335

Amount of Each Disbursement this Period

302.10

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ROBINSON, NICK, , ,**

Mailing Address 583 TRITON WAY

City  
ELLISVILLEState  
MOZip Code  
63011Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

FEC Identification Number

**C**

Transaction ID : SB21B.15337

Amount of Each Disbursement this Period

720.35

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROCKMAN & SONS PUBLISHING**

Mailing Address 240 N. FENWAY DRIVE

City  
FENTONState  
MIZip Code  
48430Purpose of Disbursement  
PRIMARY POSTCARDS

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		02		2016

FEC Identification Number

**C**

Transaction ID : SB21B.15336

Amount of Each Disbursement this Period

1567.72

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2590.17



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 152 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. RODRIGUEZ-JIMINEZ, JORGE, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Mailing Address 6603 NW BLAIR ROAD

City  
PARKVILLEState  
MOZip Code  
64152Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

768.12

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**B. SCHNECK, BRIAN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 22 PATRICIA LN

City  
LAKE GROVEState  
NYZip Code  
11755-2842Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

2609.08

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

**C. SIMPSON, VAN, , ,**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		26		2016

Mailing Address 1395 E. PEARCE BLVD.

City  
WENTZVILLEState  
MOZip Code  
63385Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
Type

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

1007.38

☐ Memo Item

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

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

4384.58



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 153 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. SQUILLACE, CLARICE, , ,**

Mailing Address 43432 PENDLETON CIRCLE

City  
STERLING HEIGHTSState  
MIZip Code  
48313Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

2174.86

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STEVENSON, STAN, , ,**

Mailing Address 1395 E. PEARCE BLVD.

City  
WENTZVILLEState  
MOZip Code  
63385Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		09		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

296.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. THE DOWNTOWN CLUB**

Mailing Address 925 N. 2ND STREET

City  
PHILADELPHIAState  
PAZip Code  
19123Purpose of Disbursement  
UAW DNC RECEPTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		20		2016

FEC Identification Number

**C****Transaction ID : SB21B.15325**

Amount of Each Disbursement this Period

40646.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

43116.86

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. TYRREL, SCOTT, , ,**

Mailing Address 96 HUDSON AVE.

City  
BRENTWOODState  
NYZip Code  
11717Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

FEC Identification Number

**C****Transaction ID : SB21B.15339**

Amount of Each Disbursement this Period

2278.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. U.S. POSTMASTER**

Mailing Address 1725 E. 14 MILE SUITE 120

City  
TROYState  
MIZip Code  
48083-4600Purpose of Disbursement  
POSTAGE VCAP R1 RETIREE TICS  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB21B.15332**

Amount of Each Disbursement this Period

10342.89

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UAW LOCAL 5**

Mailing Address 1426 S MAIN STREET

City  
SOUTH BENDState  
INZip Code  
46613Purpose of Disbursement  
CONTRIBUTION FOR A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

FEC Identification Number

**C****Transaction ID : SB21B.15335**

Amount of Each Disbursement this Period

2878.13

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

15499.42

**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 PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. UNDERHILL, ADAM, , ,**

Mailing Address 446 BLUFF DRIVE

City  
MIDDLEVILLEState  
MIZip Code  
49333Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			0	9			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15333**

Amount of Each Disbursement this Period

2476.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WAGNER, CHRIS, , ,**

Mailing Address 401 CENTER ST.

City  
MARQUETTEState  
MIZip Code  
49855Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15333**

Amount of Each Disbursement this Period

2887.20

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. WESTON, LONNIE, , ,**

Mailing Address 4402 AVON DRIVE

City  
ANDERSONState  
INZip Code  
46013Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15333**

Amount of Each Disbursement this Period

2622.89

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

7986.29

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 156 OF 191

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. WHEELER, PHIL, , ,**

Mailing Address PO BOX 132

City  
MIDDLE HADDAYState  
CTZip Code  
06456Purpose of Disbursement  
CONTRIBUTION TO A DELEGATE ATTENDING A NATIONAL  
CONVENTION  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15338**

Amount of Each Disbursement this Period

2242.40

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WHITE, JASMIN, , ,**

Mailing Address 2704 E CR 350 S

City  
MUNCIEState  
INZip Code  
47302Purpose of Disbursement  
UNCASHED VCAP PRIZE  
Candidate NameCategory/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB21B.15553**

Amount of Each Disbursement this Period

-100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

2142.40

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

204338.50

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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. UAW MICHIGAN V-PAC**

Mailing Address 8000 E. JEFFERSON

City  
DETROITState  
MIZip Code  
48214Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		09		2016

FEC Identification Number

C

Transaction ID : SB22.153393

Amount of Each Disbursement this Period

125000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. UAW MICHIGAN V-PAC**

Mailing Address 8000 E. JEFFERSON

City  
DETROITState  
MIZip Code  
48214Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		13		2016

FEC Identification Number

C

Transaction ID : SB22.153394

Amount of Each Disbursement this Period

400000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UAW MICHIGAN V-PAC**

Mailing Address 8000 E. JEFFERSON

City  
DETROITState  
MIZip Code  
48214Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2016

FEC Identification Number

C

Transaction ID : SB22.153395

Amount of Each Disbursement this Period

250000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

775000.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 158 OF 191

<input type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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. UAW MICHIGAN V-PAC**

Mailing Address 8000 E. JEFFERSON

City  
DETROITState  
MIZip Code  
48214Purpose of Disbursement  
TRANSFER TO AFFILIATED COMMITTEE

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2016

FEC Identification Number

**C****Transaction ID : SB22.153396**

Amount of Each Disbursement this Period

350000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify)Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President  
State: District:Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼Category/  
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

350000.00

1125000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 159 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. 13TH CONGRESSIONAL DISTRICT**

Mailing Address 10 WITHERELL STREET, UNIT 3103

City  
DETROITState  
MIZip Code  
48226Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

FEC Identification Number

**C** Transaction ID : SB23.153460

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ALEXANDER GREEN FOR CONGRESS**Mailing Address 3003 SOUTH LOOP WEST  
SUITE 321City  
HOUSTONState  
TXZip Code  
77054Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**GREEN, ALEXANDER, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

**C** C00396028Transaction ID : SB23.153487  
Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ALMA ADAMS FOR CONGRESS**

Mailing Address PO BOX 20622

City  
GREENSBOROState  
NCZip Code  
27420Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**ADAMS, ALMA SHEALEY, , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C** C00546358Transaction ID : SB23.153466  
Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. AMERIPAC**

Mailing Address 1341 G STREET NW SUITE 200

City  
WASHINGTONState  
DCZip Code  
20005Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				3	0		2	0	1	6		

FEC Identification Number

**C** C00348920**Transaction ID : SB23.153408**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ANN MC LANE KUSTER FOR CONGRESS**

Mailing Address PO BOX 1498

City  
CONCORDState  
NHZip Code  
03302Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KUSTER, ANN MCLANE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NH

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8				3	1		2	0	1	6		

FEC Identification Number

**C** C00473751**Transaction ID : SB23.153467**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. BILL FOSTER FOR CONGRESS**

Mailing Address PO BOX 703

City  
GENEVAState  
ILZip Code  
60134Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**FOSTER, G. WILLIAM (BIL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 14

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9				2	9		2	0	1	6		

FEC Identification Number

**C** C00435099**Transaction ID : SB23.153436**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. BILL OTTO FOR CONGRESS**

Mailing Address 11841 SOLOGNE COURT

City  
MARYLAND HEIGHTSState  
MOZip Code  
63043Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**OTTO, BILL MR., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MO

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

**C** C00577460**Transaction ID : SB23.153462**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CARROLL FOR COLORADO**

Mailing Address PO BOX 470783

City  
AURORAState  
COZip Code  
80047-0783Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CARROLL, MORGAN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO

District: 06

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C** H6CO06058**Transaction ID : SB23.153404**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CATHERINE CORTEZ MASTO FOR SENATE**

Mailing Address 8020 SOUTH RAINBOW BLVD #100-112

City  
LAS VEGASState  
NVZip Code  
89139Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MASTO, CATHERINE CORTEZ, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NV

District: 00

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

**C** C00575548**Transaction ID : SB23.153473**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. CHANE FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Mailing Address PO BOX 33322

City  
PALM BEACH GARDENSState  
FLZip Code  
33420Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CHANE, JONATHAN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 18

Category/  
Type

FEC Identification Number

**C** C00580498**Transaction ID : SB23.153412**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. CHARLIE CRIST FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Mailing Address PO BOX 1547

City  
ST. PETERSBURGState  
FLZip Code  
33731Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CRIST, CHARLIE, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 00

Category/  
Type

FEC Identification Number

**C** C00590067**Transaction ID : SB23.153416**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. CHARLIE CRIST FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Mailing Address PO BOX 1547

City  
ST. PETERSBURGState  
FLZip Code  
33731Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CRIST, CHARLIE, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 00

Category/  
Type

FEC Identification Number

**C** C00590067**Transaction ID : SB23.153424**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. CHERI BUSTOS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address 499 SOUTH CAPITOL ST., NW  
SUITE 422City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**BUSTOS, CHERI, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 17

Category/  
Type

FEC Identification Number

**C** C00498568**Transaction ID : SB23.153435**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COLEMAN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address PO BOX 165

City  
SOUTH BENDState  
INZip Code  
46624Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**COLEMAN, LYNN CARNELL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 02

Category/  
Type

FEC Identification Number

**C** C00597641**Transaction ID : SB23.153443**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. COMMITTEE TO ELECT HANK JOHNSON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 5240 SNAPPFINGER PARK DR.  
SUITE 140City  
DECATURState  
GAZip Code  
30035Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**JOHNSON, HENRY C 'HANK' JR, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: GA District: 04

Category/  
Type

FEC Identification Number

**C** C00418293**Transaction ID : SB23.153427**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. COMMITTEE TO ELECT LINDA SANCHEZ**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address P.O. BOX 1865

City  
HAWAIIAN GARDENSState  
CAZip Code  
90716Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SANCHEZ, LINDA, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA

District: 39

Category/  
Type

FEC Identification Number

**C** C00384057**Transaction ID : SB23.153399**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO ELECT MICHELLE LUJAN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address PO BOX 25422

City  
ALBUQUERQUEState  
MNZip Code  
87125Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**GRISHAM, MICHELLE LUJAN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM

District: 01

Category/  
Type

FEC Identification Number

**C** C00501254**Transaction ID : SB23.153470**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAN LIPINSKI FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 5838 S. ARCHER

City  
CHICAGOState  
ILZip Code  
60638Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**LIPINSKI, DANIEL WILLIAM, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 03

Category/  
Type

FEC Identification Number

**C** C00405431**Transaction ID : SB23.153439**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. DARREN SOTO FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Mailing Address 338 N MAGNOLIA AVENUE  
SUITE DCity  
ORLANDOState  
FLZip Code  
32801Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SOTO, DARREN, DARREN, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 09

Category/  
Type

FEC Identification Number

**C** C00581074**Transaction ID : SB23.153414**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DARREN SOTO FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		14		2016

Mailing Address 338 N MAGNOLIA AVENUE  
SUITE DCity  
ORLANDOState  
FLZip Code  
32801Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SOTO, DARREN, DARREN, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 09

Category/  
Type

FEC Identification Number

**C** C00581074**Transaction ID : SB23.153425**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DAVID PRICE FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

Mailing Address PO BOX 1986

City  
RALEIGHState  
NCZip Code  
27602Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**PRICE, DAVID, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NC District: 04

Category/  
Type

FEC Identification Number

**C** C00195628**Transaction ID : SB23.153463**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

12500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. DAVIS FOR CONGRESS/FRIENDS OF DAVIS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address PO BOX 2842

City  
WASHINGTONState  
DCZip Code  
20013Purpose of Disbursement  
DANNY K DAVIS

Candidate Name

**DAVIS, DANNY K, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

State: IL

District: 07

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

Category/  
Type

FEC Identification Number

**C** C00172619**Transaction ID : SB23.153440**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DCCC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		27		2016

Mailing Address 430 SOUTH CAPITOL STREET

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐

House

☐

Senate

☐

President

State:

District:

Disbursement For:

☐

Primary

☐

General

☐

Other (specify)

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB23.155564**

Amount of Each Disbursement this Period

105000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 1725 MAIN STREET  
SUITE 215City  
WESTONState  
FLZip Code  
33326Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**WASSERMAN SCHULTZ, DEBBIE, , ,**

Office Sought:

☒

House

☐

Senate

☐

President

State: FL

District: 20

Disbursement For: 2016

☐

Primary

☒

General

☐

Other (specify) ▼

Category/  
Type

FEC Identification Number

**C** C00385773**Transaction ID : SB23.153422**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

115000.00

**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 PageFOR 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"/> 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. DEMAREE FOR CONGRESS**Mailing Address 9801 FALL CREEK ROAD  
NUM 191City  
INDIANAPOLISState  
INZip Code  
46256Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**DEMAREE, ANGELA JO, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN

District: 05

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

**C** C00584946**Transaction ID : SB23.153445**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC ORGANIZATION OF QUEENS COUNTY**

Mailing Address 193 MALCOM X BLVD., SUITE 1

City  
NEW YORKState  
NYZip Code  
10026Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB23.153475**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DIANA DEGETTE FOR CONGRESS**

Mailing Address PO BOX 75214

City  
WASHINGTONState  
DCZip Code  
20013-5214Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**DEGETTE, DIANA L, ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CO

District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

**C** C00311639**Transaction ID : SB23.153400**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. DOGETT FOR US CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address 138 D STREET, SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
LLOYD DOGETT

Candidate Name

**DOGETT, LLOYD A MR., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX

District: 25

Category/  
Type

FEC Identification Number

**C** C00286500**Transaction ID : SB23.153486**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. DONALD NORCROSS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address PO BOX 160

City  
COLLINGSWOODState  
NJZip Code  
08108Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**NORCROSS, DONALD W., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NJ

District: 01

Category/  
Type

FEC Identification Number

**C** C00558320**Transaction ID : SB23.153468**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. DUTCH RUPPERSBERGER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address P.O. BOX 5675

City  
TIMONIUMState  
MDZip Code  
21094Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**RUPPERSBERGER, DUTCH, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD

District: 02

Category/  
Type

FEC Identification Number

**C** C00376673**Transaction ID : SB23.153449**

Amount of Each Disbursement this Period

2000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

9500.00

**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 PageFOR 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"/> 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. ELECT APRIL FREEMAN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		24		2016

Mailing Address 10051 MCGREGOR BLVD.  
SUITE 204City  
FORT MYERSState  
FLZip Code  
33919Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**FREEMAN, APRIL JUNE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District: 19

Category/  
Type

FEC Identification Number

**C** C00541359**Transaction ID : SB23.153410**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. ELECT APRIL FREEMAN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 10051 MCGREGOR BLVD.  
SUITE 204City  
FORT MYERSState  
FLZip Code  
33919Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**FREEMAN, APRIL JUNE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 19

Category/  
Type

FEC Identification Number

**C** C00541359**Transaction ID : SB23.153423**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. EMILY CAIN FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address P.O. BOX 1523

City  
BANGORState  
MEZip Code  
04402Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CAIN, EMILY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: ME

District: 02

Category/  
Type

FEC Identification Number

**C** C00546077**Transaction ID : SB23.153454**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. ESPAILLAT FOR CONGRESS 2016**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 210 SHERMAN AVENUE, SUITE A

City  
NEW YORKState  
NYZip Code  
10034Purpose of Disbursement  
CONTRIBUTION

FEC Identification Number

**C** C00593525**Transaction ID : SB23.153477**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Candidate Name

**ESPAILLAT, ADRIANO, , ,**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 13

Full Name (Last, First, Middle Initial)

**B. FRANK ACCAVITTI JR FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

Mailing Address 49 LAKE SHORE LN

City  
GROSSE POINTE SHORState  
MIZip Code  
48236Purpose of Disbursement  
CONTRIBUTION

FEC Identification Number

**C** C00615195**Transaction ID : SB23.153459**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Candidate Name

**ACCAVITTI, FRANK MR. JR, , , Jr.**Category/  
Type

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 10

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF CJ FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address 1 S. CHURCH STREET #501

City  
BELLEVILLEState  
ILZip Code  
62220Purpose of Disbursement  
CJ BARICEVIC

FEC Identification Number

**C** C00576710**Transaction ID : SB23.153433**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Candidate Name

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL

District: 12

**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 PageFOR 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"/> 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 CORRINE BROWN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		30		2016

Mailing Address 421 NEW JERSEY AVENUE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
UNCASHED CONTRIBUTION CHECK

Candidate Name

**BROWN, CORRINE, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL District: 03

Category/  
Type

FEC Identification Number

**C** C00272732**Transaction ID : SB23.155541**

Amount of Each Disbursement this Period

-5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JOHN PLUMB**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

Mailing Address P.O. BOX 2016

City  
JAMESTOWNState  
NYZip Code  
14702Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**PLUMB, JOHN, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY District: 23

Category/  
Type

FEC Identification Number

**C** C00580829**Transaction ID : SB23.153481**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF PATRICK MURPHY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 4521 PGA BLVD #412

City  
PALM BEACH GARDENSState  
FLZip Code  
33418Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MURPHY, PATRICK, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 18

Category/  
Type

FEC Identification Number

**C** C00493825**Transaction ID : SB23.153426**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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 RAJA FOR CONGRESS**

Mailing Address PO BOX 681202

City  
SCHAUMBURGState  
ILZip Code  
60168Purpose of Disbursement  
RAJA KRISHNAMOORTHY

Candidate Name

Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

**C** C00575092**Transaction ID : SB23.153438**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. GAIL SCHWARTZ FOR CONGRESS**

Mailing Address PO BOX 983

City  
CARBONDALEState  
COZip Code  
81623Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SCHWARTZ, GAIL SHERIDAN MS., , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

State: CO District: 03

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C** C00614073**Transaction ID : SB23.153402**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. GENE GREEN CONGRESSIONAL CAMPAIGN**

Mailing Address PO BOX 16128

City  
HOUSTONState  
TXZip Code  
77222Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**GREEN, RAYMOND E. 'GENE', , ,**Office Sought: ☒ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: TX District: 29

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	9			2	0	1	6		

FEC Identification Number

**C** C00254185**Transaction ID : SB23.153488**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. HOYER FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	30	/	2016

Mailing Address PO BOX 2884

City  
WASHINGTONState  
DCZip Code  
20013Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**HOYER, STENY HAMILTON, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD

District: 05

Category/  
Type

FEC Identification Number

**C** C00140715**Transaction ID : SB23.153452**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. INDIANA DEMOCRATIC PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08	/	31	/	2016

Mailing Address ONE NORTH CAPITOL AVE

City  
INDIANAPOLISState  
INZip Code  
46204Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB23.153444**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. JIM GRAY FOR KENTUCKY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	19	/	2016

Mailing Address PO BOX 2136

City  
LEXINGTONState  
KYZip Code  
40588Purpose of Disbursement  
JIM GRAY

Candidate Name

**GRAY, JIM P, , ,**

Office Sought:

☐ House  
☒ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: KY

District: 00

Category/  
Type

FEC Identification Number

**C** C00608224**Transaction ID : SB23.153447**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

12500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. JOE GARCIA FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 12930 SW. 128TH STREET  
SUITE 102City  
MIAMIState  
FLZip Code  
33186Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**GARCIA, JOE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 25

Category/  
Type

FEC Identification Number

**C** C00445114**Transaction ID : SB23.153421**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. JUDY CHU FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1531 PURDUE AVE.

City  
LOS ANGELESState  
CAZip Code  
90025Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**CHU, JUDY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: CA District: 32

Category/  
Type

FEC Identification Number

**C** C00458125**Transaction ID : SB23.153398**

Amount of Each Disbursement this Period

2700.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KAPTUR FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

Mailing Address PO BOX 899

City  
TOLEDOState  
OHZip Code  
43697Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KAPTUR, MARCY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH District: 09

Category/  
Type

FEC Identification Number

**C** C00154625**Transaction ID : SB23.153482**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

8700.00
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**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. KAPTUR FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address PO BOX 899

City  
TOLEDOState  
OHZip Code  
43697Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KAPTUR, MARCY, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: OH

District: 09

Category/  
Type

FEC Identification Number

**C** C00154625**Transaction ID : SB23.153483**

Amount of Each Disbursement this Period

4000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KIM MYERS FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address PO BOX 1255

City  
VESTALState  
NYZip Code  
13851Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MYERS, KIM, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NY

District: 22

Category/  
Type

FEC Identification Number

**C** C00610642**Transaction ID : SB23.153479**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. KOLLER FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		24		2016

Mailing Address PO BOX 3683

City  
OCALAState  
FLZip Code  
34478Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KOLLER, DAVID C, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☒ Primary ☐ General  
☐ Other (specify) ▼

State: FL

District: 11

Category/  
Type

FEC Identification Number

**C** C00552448**Transaction ID : SB23.153409**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

11500.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 176 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<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. KOLLER FOR CONGRESS**

Mailing Address PO BOX 3683

City  
OCALAState  
FLZip Code  
34478Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KOLLER, DAVID C, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 11

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

**C** C00552448**Transaction ID : SB23.153418**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. KUMAR FOR CONGRESS**

Mailing Address 1556 BARTLEY LANE

City  
BLOOMFIELDState  
MIZip Code  
48304Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KUMAR, ANIL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 11

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

**C** C00548925**Transaction ID : SB23.153457**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. LEADERSHIP, OPPORTUNITY, INNOVATION,**

Mailing Address 1050-17TH ST., NW, SUITE 590

City  
WASHINGTONState  
DCZip Code  
20036Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB23.153407**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. LEVIN FOR CONGRESS COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		19		2016

Mailing Address 436 NEW JERSY AVENUE SE

City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**LEVIN, SANDER M MR, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MI

District: 12

Category/  
Type

FEC Identification Number

**C** C00156612**Transaction ID : SB23.153455**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. LOEBSACK FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		22		2016

Mailing Address 385 EAST COLLEGE ST.

City  
IOWA CITYState  
IAZip Code  
52314Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**LOEBSACK, DAVID WAYNE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 02

Category/  
Type

FEC Identification Number

**C** C00414318**Transaction ID : SB23.153431**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MISSOURI DEMOCRATIC STATE COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
07		21		2016

Mailing Address PO BOX 719

City  
JEFFERSON CITYState  
MOZip Code  
66102Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

FEC Identification Number

**C** C00135558**Transaction ID : SB23.160612**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**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 PageFOR 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"/> 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. MONICA VERNON FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

Mailing Address P.O. BOX 1635

City  
CEDAR RAPIDSState  
IAZip Code  
52406Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**VERNON, MONICA W, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 01

Category/  
Type

FEC Identification Number

**C** C00571562**Transaction ID : SB23.153429**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MOWRER FOR IOWA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		22		2016

Mailing Address PO BOX 9

City  
BOONEState  
IAZip Code  
50036Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MOWRER, JIM, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IA

District: 04

Category/  
Type

FEC Identification Number

**C** C00546549**Transaction ID : SB23.153430**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PEOPLE FOR BEN LUJAN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

Mailing Address 422 C STREET, NE LOWER LEVEL

City  
WASHINGTONState  
DCZip Code  
20002Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**LUJAN, BEN, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM

District: 03

Category/  
Type

FEC Identification Number

**C** C00443689**Transaction ID : SB23.153469**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. PEOPLE FOR PATTY MURRAY**

Mailing Address PO BOX 3662

City  
SEATTLEState  
WAZip Code  
98124Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MURRAY, PATTY, , ,**

Office Sought:

☐ House☒ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: WA

District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

FEC Identification Number

**C** C00257642**Transaction ID : SB23.153489**

Amount of Each Disbursement this Period

1500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. RICHMOND FOR CONGRESS**Mailing Address 499 SOUTH CAPITOL ST.,  
SW SUITE 422City  
WASHINGTONState  
DCZip Code  
20003Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**RICHMOND, CEDRIC L., , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: LA

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

**C** C00451336**Transaction ID : SB23.153448**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ROBIN KELLY FOR CONGRESS**

Mailing Address PO BOX 6953

City  
CHICAGOState  
ILZip Code  
60680Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**KELLY, ROBIN, , ,**

Office Sought:

☒ House☐ Senate☐ President

Disbursement For: 2016

☐ Primary☒ General☐ Other (specify) ▼

State: IL

District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2016

FEC Identification Number

**C** C00539866**Transaction ID : SB23.153437**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

11500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. ROSS VICTORY FUND**

Mailing Address 1289 FORDHAM BLVD., BOX 197

City  
CHAPEL HILLState  
NCZip Code  
27514Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

**C** **Transaction ID : SB23.153465**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. SCHNEIDER FOR CONGRESS**

Mailing Address PO BOX 1318

City  
DEERFIELDState  
ILZip Code  
60015Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SCHNEIDER, BRADLEY SCOTT, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IL District: 10

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

FEC Identification Number

**C** C00495952**Transaction ID : SB23.153434**

Amount of Each Disbursement this Period

 5000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. SHELLI YODER FOR INDIANA**

Mailing Address PO BOX 6654

City  
BLOOMINGTONState  
INZip Code  
47407Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**YODER, SHELLI, , ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: IN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		25		2016

FEC Identification Number

**C** C00583427**Transaction ID : SB23.153441**

Amount of Each Disbursement this Period

 2500.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 12500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. SOULES FOR US CONGRESS**

Mailing Address 6760 BRIGHT VIEW RD.

City  
LAS CRUCESState  
NMZip Code  
88007Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**SOULES, MERRIE LEE MS., , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: NM

District: 02

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			3	0			2	0	1	6		

FEC Identification Number

**C** C00607762**Transaction ID : SB23.153472**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. STEPHANIE MURPHY FOR CONGRESS**

Mailing Address PO BOX 205

City  
WINTER PARKState  
FLZip Code  
32790Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**MURPHY, STEPHANIE, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL

District: 07

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

**C** C00620443**Transaction ID : SB23.153420**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. STRICKLAND OHIO VICTORY FUND 2016**

Mailing Address PO BOX 2196

City  
COLUMBUSState  
OHZip Code  
43216Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	9			2	0	1	6		

FEC Identification Number

**C****Transaction ID : SB23.153485**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

12500.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. TIM WALZ FOR CONGRESS**

Mailing Address PO BOX 938

City  
MANKATOState  
MNZip Code  
56002Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**WALZ, TIMOTHY J, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MN District: 01

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			2	2			2	0	1	6		

FEC Identification Number

**C** C00409409**Transaction ID : SB23.153461**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. VAL DEMINGS FOR CONGRESS**

Mailing Address PO BOX 536926

City  
ORLANDOState  
FLZip Code  
32853Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**DEMINGS, VALDEZ VAL, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: FL District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	9			1	4			2	0	1	6		

FEC Identification Number

**C** C00590489**Transaction ID : SB23.153417**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. VAN HOLLEN FOR SENATE**

Mailing Address 10605 CONCORD ST SUITE 202

City  
KENSINGTONState  
MDZip Code  
20895Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**VAN HOLLEN, CHRIS, ,**Office Sought: ☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: MD District: 08

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	8			3	1			2	0	1	6		

FEC Identification Number

**C** C00573758**Transaction ID : SB23.153451**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

15000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR 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"/> 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. WILL BOYD FOR CONGRESS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

Mailing Address P.O. BOX 475

City  
FLORENCEState  
ALZip Code  
35631Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**BOYD, WILL, , ,**

Office Sought:

☒ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State: AL

District: 05

Category/  
Type

FEC Identification Number

**C** C00581819**Transaction ID : SB23.153397**

Amount of Each Disbursement this Period

2500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. WORKING FAMILIES PARTY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		30		2016

Mailing Address 88 THIRD AVE, 4TH FLOOR

City  
BROOKLYNState  
NYZip Code  
11217Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

FEC Identification Number

**C****Transaction ID : SB23.153405**

Amount of Each Disbursement this Period

5000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

Category/  
Type

FEC Identification Number

**C**

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►

7500.00

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

389700.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 184 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. COOPER FOR NORTH CAROLINA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 434 FAYETTEVILLE STREET,  
SUITE 2020City  
RALEIGHState  
NCZip Code  
27601Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB29.153503

Amount of Each Disbursement this Period

5100.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FLUHARTY FOR HOUSE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1300 MARKET STREET

City  
WHEELINGState  
WVZip Code  
26003Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB29.153495

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF BARBARA**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 235 HIGH STREET  
SUITE 618City  
MORGANTOWNState  
WVZip Code  
26505Purpose of Disbursement  
CONTRIBUTION

Candidate Name

**FLEISCHAUER, BARBARA, , ,**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

FEC Identification Number

**C**

Transaction ID : SB29.155580

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

6600.00



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 185 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. FRIENDS OF BARBY**

Mailing Address P.O. BOX 1306

City  
INWOODState  
WVZip Code  
25428Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB29.153504**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ISSAC**

Mailing Address P.O. BOX 578

City  
FRANKLINState  
WVZip Code  
26807Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB29.153501**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF PHIL DISERIO**

Mailing Address 866 DONEGAL DRIVE, W.

City  
FOLLENSBEEState  
WVZip Code  
26037Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB29.153496**

Amount of Each Disbursement this Period

500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

2500.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 186 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. FRIENDS OF SAMMI BROWN**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 185 HALE ROAD

City  
CHARLES TOWNState  
WVZip Code  
25414Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB29.153502**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. HOLDEN FOR HOUSE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1015 BELMONT STREET

City  
CHARLESTONState  
WVZip Code  
25314Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB29.153498**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. ILLINOIS STATE PAC**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		19		2016

Mailing Address 680 BARCLAY BLVD.

City  
LINCOLNSHIREState  
ILZip Code  
60069Purpose of Disbursement  
REPLENISHMENT

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

**C****Transaction ID : SB29.153511**

Amount of Each Disbursement this Period

120000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

121500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. KEADLE FOR WV**

Mailing Address P.O. BOX 875

City  
ROMNEYState  
WVZip Code  
26757Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB29.155588**

Amount of Each Disbursement this Period

500.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MIKE PUSHKIN FOR HOUSE CAMPAIGN**

Mailing Address 1583 VIRGINIA STREET, EAST

City  
CHARLESTOWNState  
WVZip Code  
25311Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

FEC Identification Number

**C****Transaction ID : SB29.153494**

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MISSOURIANS FOR KOSTER**

Mailing Address PO BOX 1551

City  
JEFFERSON CITYState  
MOZip Code  
65102Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016 ☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		25		2016

FEC Identification Number

**C****Transaction ID : SB29.153492**

Amount of Each Disbursement this Period

200000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

201500.00

**SCHEDULE B (FEC Form 3X)**  
**ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 188 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. MISSOURI DEMOCRATIC STATE COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		21		2016

Mailing Address PO BOX 719

City  
JEFFERSON CITYState  
MOZip Code  
66102Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C C00135558

Transaction ID : SB29.155566

Amount of Each Disbursement this Period

20000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. MISSOURI DEMOCRATIC STATE COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 208 MADISON AVE

City  
JEFFERSON CITYState  
MOZip Code  
65101Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB29.153509

Amount of Each Disbursement this Period

50000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. MISSOURI DEMOCRATIC STATE COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		14		2016

Mailing Address 208 MADISON AVE

City  
JEFFERSON CITYState  
MOZip Code  
65101Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
TypeOffice 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:

FEC Identification Number

C

Transaction ID : SB29.160609

Amount of Each Disbursement this Period

25000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

95000.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 189 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. NANCY JAMISON 4 THE WV HOUSE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 1031 FT. MARTIN ROAD

City  
MAIDSVILLEState  
WVZip Code  
26541Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.153493

Amount of Each Disbursement this Period

250.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. NATALIE TENNANT FOR WV**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address PO BOX 2545

City  
CHARLESTONState  
WVZip Code  
25329Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.153506

Amount of Each Disbursement this Period

1000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. PERDUE FOR TREASURER 2016**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		31		2016

Mailing Address 608 VIRGINIA STREET, EAST

City  
CHARLESTOWNState  
WVZip Code  
25301Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary ☒ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.153507

Amount of Each Disbursement this Period

1000.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 190 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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. SKINNER FOR WV**

Mailing Address PO BOX 366

City  
SHEPHERDSTOWNState  
WVZip Code  
25443Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

**C** **Transaction ID : SB29.153505**

Amount of Each Disbursement this Period

 1000.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. TO ELECT GARY 'PEANUT' COLLIS**

Mailing Address 215 ANCHOR DRIVE

City  
INWOODState  
WVZip Code  
25428Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify)

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

**C** **Transaction ID : SB29.153500**

Amount of Each Disbursement this Period

 500.00☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. UAW NORTH CAROLINA V-PAC**Mailing Address 1005 NORTH POINT BOULEVARD  
SUITE 701City  
BALTIMOREState  
MDZip Code  
21224Purpose of Disbursement  
CONTRIBUTIONS STATE/LOCAL

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
08		31		2016

FEC Identification Number

**C** **Transaction ID : SB29.153508**

Amount of Each Disbursement this Period

 4000.00☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ► 5500.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 191 OF 191

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<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 REGION 5 PAC**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y
09		14		2016

Mailing Address 721 DUNN ROAD

City  
HAZELWOODState  
MOZip Code  
63042Purpose of Disbursement  
CONTRIBUTION

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Transaction ID : SB29.153510

Amount of Each Disbursement this Period

100000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M	/	D D	/	Y Y Y Y Y Y

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/  
Type

Office Sought:

☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State:

District:

FEC Identification Number

C

Amount of Each Disbursement this Period

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶

100000.00

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

534850.00