



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		140524.62
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period .....	156344.24									
(c) Total Receipts (from Line 19) .....	32365.38	189410.00								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	188709.62	329934.62								
7. Total Disbursements (from Line 31) .....	40500.00	181725.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	148209.62	148209.62								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

American Maritime Officers Voluntary Political Action Fund

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	1	1

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) .....	11353.00	57113.00
(ii) Unitemized .....	21009.80	131044.20
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	32362.80	188157.20
(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) .....	32362.80	188157.20
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	1240.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	2.58	12.80
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	32365.38	189410.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	32365.38	189410.00

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	40500.00	181500.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	225.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	40500.00	181725.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	40500.00	181725.00

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) .....	32362.80	188157.20
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	32362.80	188157.20
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 27
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)  
JOHN BARNETT

Mailing Address P O BOX 780

City UTOPIA State TX Zip Code 78884

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

Name of Employer MAERSK LINE LTD Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 20 / 2011

Transaction ID: SA11AI.58811

Amount of Each Receipt this Period 300.00

**B.**

Full Name (Last, First, Middle Initial)  
THOMAS BAYER

Mailing Address PO BOX 545

City ESCANABA State MI Zip Code 49829

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

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 311.00

Date of Receipt 05 / 12 / 2011

Transaction ID: SA11AI.58765

Amount of Each Receipt this Period 99.00

**C.**

Full Name (Last, First, Middle Initial)  
BRENCIE BEDWELL

Mailing Address 3106 BIMINI DRIVE

City CORPUS CHRISTI State TX Zip Code 78418

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

Name of Employer OCEAN SHIPHOLDINGS, INC. Occupation 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt 05 / 31 / 2011

Transaction ID: SA11AI.58905

Amount of Each Receipt this Period 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ 599.00

**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 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial) PAUL BONNEY		Date of Receipt MM / DD / YYYY 05 / 05 / 2011
Mailing Address 63 Emerald 63 Emerald St #377		Transaction ID: SA11AI.58711
City Keene	State NH	Zip Code 03431
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 400.00
Name of Employer SEALIFT, INC.	Occupation MASTER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

**B.**

Full Name (Last, First, Middle Initial) ANTHONY BORNHOFT		Date of Receipt MM / DD / YYYY 05 / 20 / 2011
Mailing Address 704 4th ave		Transaction ID: SA11AI.58812
City WINDOM	State MN	Zip Code 56101
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 96.00
Name of Employer ISPAT INLAND INC.	Occupation 3rd Asst Engineer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 231.00	

**C.**

Full Name (Last, First, Middle Initial) JOHN COLEMAN		Date of Receipt MM / DD / YYYY 05 / 24 / 2011
Mailing Address 1616 MISTY LAKE DR.		Transaction ID: SA11AI.58881
City ORANGE PARK	State FL	Zip Code 32073
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 200.00
Name of Employer Various Shipping Companies	Occupation Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>696.00</b>
<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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)  
NEIL A DABOUL

Mailing Address 526 WESTOVER AVENUE

City NORFOLK State VA Zip Code 23507

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

Name of Employer ARGENT MARINE OPERATIONS, INC. Occupation Master

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 05 / 27 / 2011  
Transaction ID: SA11AI.58860  
Amount of Each Receipt this Period: 250.00

**B.**

Full Name (Last, First, Middle Initial)  
JOHN DEMOS

Mailing Address 306 GOLDENEYE CT

City HAURE DE GRACE State MD Zip Code 21078

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

Name of Employer TRANSOCEANIC CABLE SHIP Occupation Chief Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 19 / 2011  
Transaction ID: SA11AI.58818  
Amount of Each Receipt this Period: 400.00

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS DOANE

Mailing Address 11044 BUCKLEY HALL RD

City MATHEWS State VA Zip Code 23109

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

Name of Employer USS TRANSPORT, LLC Occupation 3rd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 350.00

Date of Receipt: 05 / 23 / 2011  
Transaction ID: SA11AI.58822  
Amount of Each Receipt this Period: 200.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **850.00**

**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 9 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
ERIC ELLSWORTH

Mailing Address 8 JEWETT AVE.

City State Zip Code  
BRISTOL RI 02809

FEC ID number of contributing federal political committee. C

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 25 / 2011  
**Transaction ID:** SA11AI.58832

Amount of Each Receipt this Period 150.00

**B.** Full Name (Last, First, Middle Initial)  
JEFFREY FISCHER

Mailing Address 5588 W 300 N

City State Zip Code  
LAPORTE IN 46350

FEC ID number of contributing federal political committee. C

Name of Employer INTEROCEAN UGLAND MGMT. Occupation Master

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 05 / 31 / 2011  
**Transaction ID:** SA11AI.58897

Amount of Each Receipt this Period 100.00

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

Mailing Address 9696 WOODYS RUN

City State Zip Code  
TRAVERSE CITY MI 49684

FEC ID number of contributing federal political committee. C

Name of Employer Various Shipping Companies Occupation Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 246.00

Date of Receipt 05 / 13 / 2011  
**Transaction ID:** SA11AI.58775

Amount of Each Receipt this Period 96.00

**SUBTOTAL** of Receipts This Page (optional) ..... 346.00

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

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

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

FOR LINE NUMBER: PAGE 10 / 27  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

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

Mailing Address 22 LOVERING ST.

City State Zip Code  
MANCHESTER NH 03109

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE CORP 1ST ENGINEER DIESEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

**Transaction ID:** SA11AI.58761

Amount of Each Receipt this Period  
200.00

**B.** Full Name (Last, First, Middle Initial)  
WILLIAM GOULD

Mailing Address 736 SOUTH WITHAM RO

City State Zip Code  
AUBURN ME 04258

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

Name of Employer Occupation  
TRANSOCEANIC CABLE SHIP Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

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

**Transaction ID:** SA11AI.58829

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
NATHAN L GREEN

Mailing Address 218 MUIRFIELD PKWY

City State Zip Code  
CHARLESTON SC 29414

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

Name of Employer Occupation  
REMINGTON SHIPPING INC. 3rd Mate

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

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

**Transaction ID:** SA11AI.58842

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1000.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)  
JAMES HOBAN

Mailing Address E4952 CITY RD. NN

City VIROQUA State WI Zip Code 54665

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

Name of Employer SEALIFT, INC. Occupation 2nd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt: 05 / 27 / 2011  
Transaction ID: SA11AI.58871  
Amount of Each Receipt this Period: 400.00

**B.**

Full Name (Last, First, Middle Initial)  
JOSEPH HOOKER

Mailing Address 11875 FLETCHER CHAPEL RD.

City MEDINA State NY Zip Code 14103

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

Name of Employer GREAT LAKES FLEET, INC. Occupation 3rd Mate

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.00

Date of Receipt: 05 / 10 / 2011  
Transaction ID: SA11AI.58736  
Amount of Each Receipt this Period: 65.00

**C.**

Full Name (Last, First, Middle Initial)  
THADDEUS K HYATT

Mailing Address 180 VERRILL ROAD

City POWNAL State ME Zip Code 04069

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

Name of Employer AMERICAN OVERSEAS MARINE Occupation 3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 05 / 25 / 2011  
Transaction ID: SA11AI.58844  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **765.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 / 27
	<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)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) TONY KAPLAN	Date of Receipt MM / DD / YYYY 05 / 03 / 2011
	Mailing Address P.O. BOX 861	<b>Transaction ID:</b> SA11AI.58677
	City State Zip Code VOLCANO HI 96785	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Various Shipping Companies Occupation Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES KELLBERG	Date of Receipt MM / DD / YYYY 05 / 05 / 2011
	Mailing Address 1532 S.E. Royal Green Cir. apt.0-102	<b>Transaction ID:</b> SA11AI.58709
	City State Zip Code Port St. Licie FL 34952	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Various Shipping Companies Occupation Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ROBERT KIEFER	Date of Receipt MM / DD / YYYY 05 / 31 / 2011
	Mailing Address 89 BARKER AVE	<b>Transaction ID:</b> SA11AI.58912
	City State Zip Code SHARON HILL PA 19079	Amount of Each Receipt this Period 48.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Various Shipping Companies Occupation Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 252.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>748.00</b>
<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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 27  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
JOSEPH LENTOWICH

Mailing Address 1115 11TH AVE

City State Zip Code  
HOUGHTON MI 49931

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

Name of Employer Occupation  
VARIOUS SHIPPING COMPANIES MERCHANT MARINE OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt  
MM / DD / YYYY  
05 / 23 / 2011

**Transaction ID:** SA11AI.58827

Amount of Each Receipt this Period  
250.00

**B.** Full Name (Last, First, Middle Initial)  
TRAN P LUU

Mailing Address 1101 BEECHWOOD DRIVE

City State Zip Code  
HARVEY LA 70058

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

Name of Employer Occupation  
INTEROCEAN AMERICAN SHIPP-  
ING CORP 3rd Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 668.00

Date of Receipt  
MM / DD / YYYY  
05 / 04 / 2011

**Transaction ID:** SA11AI.58691

Amount of Each Receipt this Period  
668.00

**C.** Full Name (Last, First, Middle Initial)  
ARTURO MACHADO

Mailing Address 10410 S.W. 144 AVE.

City State Zip Code  
MIAMI FL 33186

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

Name of Employer Occupation  
DYN MARINE SERVICES 1ST ENGINEER DIESEL

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt  
MM / DD / YYYY  
05 / 03 / 2011

**Transaction ID:** SA11AI.58671

Amount of Each Receipt this Period  
250.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **1168.00**

**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 15 / 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) MIROSLAV MAVRA	Date of Receipt MM / DD / YYYY 05 / 25 / 2011
	Mailing Address 825 N E 70TH ST	<b>Transaction ID:</b> SA11AI.58834
	City State Zip Code BOCA RATON FL 33487	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP COMPANY (TYCO) Chief Mate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) ANDREW MAYHER	Date of Receipt MM / DD / YYYY 05 / 10 / 2011
	Mailing Address 6504 KINGSDALE BLVD	<b>Transaction ID:</b> SA11AI.58740
	City State Zip Code PARMA HTS. OH 44130	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation Various Shipping Companies Merchant Marine Officer Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ZANE MUSTION	Date of Receipt MM / DD / YYYY 05 / 18 / 2011
	Mailing Address 1000 7TH ST. NE	<b>Transaction ID:</b> SA11AI.58808
	City State Zip Code INDEPENDENCE IA 50644	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation EXPORTER TRANS./MAERSK 2nd Mate Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 250.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>950.00</b>
<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 Detailed Summary Page	FOR LINE NUMBER:	PAGE 16 / 27
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
	<input type="checkbox"/> 12	<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) GARY NEWBEGIN	Date of Receipt MM / DD / YYYY 05 / 06 / 2011
	Mailing Address RR #1 BOX 5060	<b>Transaction ID:</b> SA11AI.58700
	City State Zip Code SEDGWICK ME 04676	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation MAERSK LINE LTD. CHIEF ENGINEER DIESEL	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JONATHAN O'ROURKE	Date of Receipt MM / DD / YYYY 05 / 25 / 2011
	Mailing Address 5735 DURHAM CT	<b>Transaction ID:</b> SA11AI.58839
	City State Zip Code LA PLATA MD 20646	Amount of Each Receipt this Period 250.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation SEALIFT CHEMICALS, INC. 3rd Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LAWRENCE PELLOSMAA	Date of Receipt MM / DD / YYYY 05 / 26 / 2011
	Mailing Address 17 3RD ST. BOX 236	<b>Transaction ID:</b> SA11AI.58858
	City State Zip Code SOUTH RANGE MI 49963	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Various Shipping Companies Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	750.00
<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  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)  
TEDDY PIKE

Mailing Address 4622 SPEEDWAY RD.

City State Zip Code  
MONTOUR FALLS NY 14865

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

Name of Employer Occupation  
VICTORY MARITIME INC. 1st Asst Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 7 / 2 0 1 1

Transaction ID: SA11AI.58865

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
HARRY POOLE, JR.

Mailing Address 4849 Cullen Rd

City State Zip Code  
Fenton MI 48430

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

Name of Employer Occupation  
INTEROCEAN UGLAND MGMT. Chief Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 5 / 2 4 / 2 0 1 1

Transaction ID: SA11AI.58885

Amount of Each Receipt this Period  
200.00

**C.**

Full Name (Last, First, Middle Initial)  
MICHAEL RICHIE II

Mailing Address 553 SOMERSET COURT

City State Zip Code  
MARCO ISLAND FL 33937

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

Name of Employer Occupation  
INTEROCEAN UGLAND MGMT CO-RP. CHIEF OFFICER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 400.00

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

Transaction ID: SA11AI.58743

Amount of Each Receipt this Period  
400.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **800.00**

**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 18 / 27  
(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)  
American Maritime Officers Voluntary Political Action Fund

**A.**

Full Name (Last, First, Middle Initial)  
JAMES ROSS

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
400.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	9	/	2	0	1	1

**Transaction ID:** SA11AI.58718

Amount of Each Receipt this Period  
200.00

**B.**

Full Name (Last, First, Middle Initial)  
KIRBY STROSS

Mailing Address 2303 3RD AVE W

City State Zip Code  
HIBBING MN 55746

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

Name of Employer Occupation  
VARIOUS SHIPPING COMPANIES Merchant Marine Officer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
250.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	0	4	/	2	0	1	1

**Transaction ID:** SA11AI.58682

Amount of Each Receipt this Period  
250.00

**C.**

Full Name (Last, First, Middle Initial)  
RYAN WALL

Mailing Address 524 THICKET STREET

City State Zip Code  
WEYMOUTH MA 02190

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

Name of Employer Occupation  
AMERICAN OVERSEAS MARINE 3rd Asst Engineer

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
500.00

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	6	/	2	0	1	1

**Transaction ID:** SA11AI.58789

Amount of Each Receipt this Period  
500.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **950.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 19 / 27
	<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)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) EDWARD WILISCH	Date of Receipt MM / DD / YYYY 05 / 27 / 2011
	Mailing Address 5802 TANAGERLAKE ROAD	<b>Transaction ID:</b> SA11AI.58866
	City State Zip Code LITHIA FL 33547	Amount of Each Receipt this Period 200.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DYN MARINE SERVICES DIV. Chief Mate	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) LAURREL WILLIAMS	Date of Receipt MM / DD / YYYY 05 / 12 / 2011
	Mailing Address 2038 JUPITER BLVD SW	<b>Transaction ID:</b> SA11AI.58762
	City State Zip Code PALM BAY FL 32908	Amount of Each Receipt this Period 400.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation Various Shipping Companies Merchant Marine Officer	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 400.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) CARL WINTER	Date of Receipt MM / DD / YYYY 05 / 24 / 2011
	Mailing Address 210 MT KEMBLE AVE	<b>Transaction ID:</b> SA11AI.58878
	City State Zip Code MORRISTOWN NJ 07960	Amount of Each Receipt this Period 500.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRANSOCEANIC CABLE SHIP COMPANY (TYCO) Master	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	1100.00
<b>TOTAL</b> This Period (last page this line number only) .....	11353.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

A.	Full Name (Last, First, Middle Initial) <b>BEN CARDIN FOR SENATE</b>	<b>Transaction ID: SB23.58625</b>
	Mailing Address P.O. BOX 21093	Date of Disbursement 05 / 06 / 2011
	City CATONSVILLE State MD Zip Code 21228	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name BENJAMIN L CARDIN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 03	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) <b>BILL SHUSTER FOR CONGRESS</b>	<b>Transaction ID: SB23.58626</b>
	Mailing Address PO BOX 1473	Date of Disbursement 05 / 12 / 2011
	City ALTOONA State PA Zip Code 16603	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name WILLIAM FRANKLIN SHUSTER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 09	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) <b>BUCK MCKEON FOR CONGRESS</b>	<b>Transaction ID: SB23.58618</b>
	Mailing Address 23942 Lyons Ave #105	Date of Disbursement 05 / 06 / 2011
	City Santa Clarita State CA Zip Code 91321	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement Contribution Candidate Name HOWARD P 'BUCK' MCKEON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 25	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>6000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A.** Full Name (Last, First, Middle Initial)  
**CHARLIE DENT FOR CONGRESS**

Mailing Address PO Box 442

City Allentown State PA Zip Code 18105

Purpose of Disbursement  
Contribution

Candidate Name  
**CHARLES W DENT**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: PA District: 15

**Transaction ID:** SB23.58628  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO RE-ELECT CONGRESSMAN DUNCAN HUNTER**

Mailing Address 9340 Fuerte Drive Suite 302  
9340 Fuerte Drive Suite 302

City La Mesa State CA Zip Code 91941

Purpose of Disbursement  
Contribution

Candidate Name  
**DUNCAN D HUNTER**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 52

**Transaction ID:** SB23.58630  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
**COMMITTEE TO RE-ELECT HENRY HANK JOHNSON**

Mailing Address 6440 OLD HILLANDALE DRIVE  
SUITE 262

City LITHONIA State GA Zip Code 30058

Purpose of Disbursement  
Contribution

Candidate Name  
**HENRY C 'HANK' JR JOHNSON**

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: GA District: 04

**Transaction ID:** SB23.58638  
Date of Disbursement

/   /

Amount of Each Disbursement this Period

**SUBTOTAL** of Disbursements This Page (optional) .....

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

A.	Full Name (Last, First, Middle Initial) <b>DAN DAVIS FOR CONGRESS COMMITTEE</b>	<b>Transaction ID:</b> SB23.58650
	Mailing Address 8200 TAGSOLD HWY	Date of Disbursement 05 / 26 / 2011
	City RICA State MI Zip Code 49276	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name <b>DANNY EDWARD DAVIS</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 07	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) <b>FRIENDS OF JACK KINGSTON</b>	<b>Transaction ID:</b> SB23.58639
	Mailing Address PO BOX 2133	Date of Disbursement 05 / 19 / 2011
	City SAVANNAH State GA Zip Code 31402	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement Contribution Candidate Name <b>JOHN HEDDENS KINGSTON</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 01	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) <b>FRIENDS OF SHERROD BROWN</b>	<b>Transaction ID:</b> SB23.58629
	Mailing Address PO BOX 76187 Suite 800	Date of Disbursement 05 / 12 / 2011
	City WASHINGTON State DC Zip Code 20013	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name <b>SHERROD BROWN</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 13	Category/Type
	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>4000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 27

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

A.	Full Name (Last, First, Middle Initial) GARY MILLER FOR CONGRESS	Transaction ID: SB23.58621 Date of Disbursement 05 / 06 / 2011
	Mailing Address 721 S BREA CANYON ROAD SUITE 7	Amount of Each Disbursement this Period 2500.00
	City DIAMOND BAR State CA Zip Code 91789	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name GARY G HON. MILLER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 42	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) HIGGINS FOR CONGRESS	Transaction ID: SB23.58644 Date of Disbursement 05 / 26 / 2011
	Mailing Address PO BOX 28	Amount of Each Disbursement this Period 2500.00
	City BUFFALO State NY Zip Code 14220	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name BRIAN HIGGINS	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 27	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOE WILSON FOR CONGRESS COMMITTEE	Transaction ID: SB23.58643 Date of Disbursement 05 / 23 / 2011
	Mailing Address PO Box 2145	Amount of Each Disbursement this Period 1000.00
	City West Columbia State SC Zip Code 29171	
	Purpose of Disbursement Contribution	Category/ Type
	Candidate Name JOE WILSON	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 02	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	6000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

**A. KEEP NICK RAHALL IN CONGRESS COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address P O BOX 64

City BECKLEY, State WV Zip Code 25802

Purpose of Disbursement  
Contribution

Candidate Name  
NICK JOE J II RAHALL

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: WV District: 03

Transaction ID: SB23.58633

Date of Disbursement

05 / 19 / 2011

Amount of Each Disbursement this Period

1000.00

**B. LANGEVIN FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 181-A KNIGHT ST

City WARWICK State RI Zip Code 02886

Purpose of Disbursement  
Contribution

Candidate Name  
JAMES R LANGEVIN

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: RI District: 02

Transaction ID: SB23.58640

Date of Disbursement

05 / 19 / 2011

Amount of Each Disbursement this Period

1000.00

**C. MARCIA FUDGE FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 3729 SILSBY RD

City UNIVERSITY HEIGHTS State OH Zip Code 44118

Purpose of Disbursement  
Contribution

Candidate Name  
MARCIA L FUDGE

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: OH District: 11

Transaction ID: SB23.58641

Date of Disbursement

05 / 19 / 2011

Amount of Each Disbursement this Period

1000.00

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

3000.00

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

A.

Full Name (Last, First, Middle Initial)  
MARK CRITZ FOR CONGRESS COMMITTEE

Transaction ID: SB23.58617

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Mailing Address 551 MAIN STREET SUITE 120

Amount of Each Disbursement this Period

1000.00
---------

City JOHNSTOWN State PA Zip Code 15901

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
MARK CRITZ

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: PA District: 12

Special-General

B.

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

Transaction ID: SB23.58652

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		2	6		2	0	1	1

Mailing Address 6520 VILLAGE PARKWAY  
SECOND FLOOR

Amount of Each Disbursement this Period

1000.00
---------

City DUBLIN State CA Zip Code 94568

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
JERRY MCNERNEY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: CA District: 11

C.

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

Transaction ID: SB23.58620

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	6		2	0	1	1

Mailing Address PO Box 181546

Amount of Each Disbursement this Period

2500.00
---------

City Casselberry State FL Zip Code 32718

Purpose of Disbursement  
Contribution

Category/ Type
-------------------

Candidate Name  
JOHN L MR. MICA

Office Sought:  House  
 Senate  
 President

Disbursement For: 2012  
 Primary  General  
 Other (specify) ▼

State: FL District: 07

**SUBTOTAL** of Disbursements This Page (optional) .....

4500.00
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**TOTAL** This Period (last page this line number only) .....

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# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MICHAUD FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58619 Date of Disbursement 05 / 06 / 2011	
	Mailing Address 213 Lisbon St		
	City Lewiston State ME Zip Code 04240	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement Contribution		
	Candidate Name MICHAEL H MICHAUD	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: ME District: 02		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>ROB WITTMAN FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58646 Date of Disbursement 05 / 26 / 2011	
	Mailing Address PO BOX 999 PO BOX 999		
	City MONTROSS State VA Zip Code 22520	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement Contribution		
	Candidate Name ROBERT J. WITTMAN	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: VA District: 01		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>SIMPSON FOR CONGRESS</b>	<b>Transaction ID:</b> SB23.58642 Date of Disbursement 05 / 19 / 2011	
	Mailing Address 1487 PARKWAY DRIVE		
	City BLACKFOOT State ID Zip Code 83221	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement Contribution		
	Candidate Name MICHAEL K SIMPSON	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: ID District: 02		

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶

5500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 27 / 27

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

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NAME OF COMMITTEE (In Full)  
American Maritime Officers Voluntary Political Action Fund

<b>A.</b>	Full Name (Last, First, Middle Initial) TFP-FOJB COMMITTEE  Mailing Address 631-B PENNSYLVANIA AVENUE SE  City WASHINGTON State DC Zip Code 20003  Purpose of Disbursement Contribution Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.58647 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 2 6 / 2 0 1 1	Amount of Each Disbursement this Period  5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS  Mailing Address PO Box 437  City Farmingville State NY Zip Code 11738  Purpose of Disbursement Contribution Candidate Name TIMOTHY BISHOP  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 01  Disbursement For: 2500 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.58631 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 1	Amount of Each Disbursement this Period  2500.00
<b>C.</b>	Full Name (Last, First, Middle Initial) TODD AKIN FOR CONGRESS  Mailing Address PO BOX 31222  City ST LOUIS State MO Zip Code 63131  Purpose of Disbursement Contribution Candidate Name W TODD AKIN  Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 02  Disbursement For: 2012 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.58632 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 5 / 1 2 / 2 0 1 1	Amount of Each Disbursement this Period  1000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>8500.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>40500.00</b>