

**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
REPORT☐NEW
(N)

OR

☒AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
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

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

in the
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y

through

M M M /

D D D /

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.

Type or Print Name of Treasurer DENNIS D. WILLIAMS

Signature of Treasurer

DENNIS D. WILLIAMS

[Electronically Filed]

Date

M M M /

D D D /

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 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

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
01 / 01 / 2009 To: M M / D D / Y Y Y Y Y Y
06 / 30 / 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y Y 2009		4857803.03
(b) Cash on Hand at Beginning of Reporting Period.....	4857803.03	
(c) Total Receipts (from Line 19)	2312632.21	2312632.21
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	7170435.24	7170435.24
7. Total Disbursements (from Line 31)	1640693.33	1640693.33
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	5529741.91	5529741.91
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

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

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

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 06/2004)

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 Y
 01 / 01 / 2009

To:

 M M / D D / Y Y Y Y Y
 06 / 30 / 2009
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).....

29769.56

29769.56

(ii) Unitemized

2260122.51

2260122.51

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ►

2289892.07

2289892.07

(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) ►

2289892.07

2289892.07

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).....

16.21

16.21

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

20000.00

20000.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

2723.93

2723.93

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))..... ►

2312632.21

2312632.21

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) ►

2312632.21

2312632.21

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) 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	505690.85	505690.85
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	505690.85	505690.85
22. Transfers to Affiliated/Other Party Committees.....	531952.48	531952.48
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	410500.00	410500.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	50.00	50.00
(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)).....	50.00	50.00
29. Other Disbursements	192500.00	192500.00
30. Federal Election Activity (2 U.S.C. §431(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)) ..	1640693.33	1640693.33
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	1640693.33	1640693.33

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	2289892.07	2289892.07
34. Total Contribution Refunds (from Line 28(d))	50.00	50.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	2289842.07	2289842.07
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	505690.85	505690.85
37. Offsets to Operating Expenditures (from Line 15, page 3).....	16.21	16.21
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	505674.64	505674.64

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 OF 235

☒ 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 (Last, First, Middle Initial)

A. THOMAS ASHTON

Mailing Address 1375 VIRGINIA DRIVE

City

FORT WASHINGTON

State

PA

Zip Code

19034-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer

SPD TECHNOLOGIES

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

05 / 13 / 2009

Transaction ID : SA11AI.106931

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. THOMAS ASHTON

Mailing Address 1375 VIRGINIA DRIVE

City

FORT WASHINGTON

State

PA

Zip Code

19034-3236

FEC ID number of contributing
federal political committee.

C

Name of Employer

SPD TECHNOLOGIES

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 14 / 2009

Transaction ID : SA11AI.106769

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. JERRY AYRES

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

GENERAL MOTORS

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 19 / 2009

Transaction ID : SA11AI.107503

Amount of Each Receipt this Period

300.00

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 7 OF 235

(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 (Last, First, Middle Initial)

A. **EDWARD BALUKAS**

Mailing Address 207 W MONROE ST

City
EASTON

State Zip Code
PA 18402-1713

FEC ID number of contributing
federal political committee.

C

Name of Employer

RENAULT

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 14 / 2009

Transaction ID : SA11AI.106955

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. **JAMES BANKS**

Mailing Address 702 NORTH JANSS ST.

City
ANAHEIM

State Zip Code
CA 92805

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALIFORNIA STATE UNIVERSITY

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2009

Transaction ID : SA11AI.106946

Amount of Each Receipt this Period

80.78

Full Name (Last, First, Middle Initial)

C. **WILLIAM BARBER**

Mailing Address 218 RADER CT

City
OLIN

State Zip Code
NC 28660

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2009

Transaction ID : SA11AI.107580

Amount of Each Receipt this Period

300.00

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

680.78

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 235

(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 (Last, First, Middle Initial)

A. BETSY BENNETT

Mailing Address 537 LAWRENCE

City

WAYLAND

State

MI

Zip Code

49348

FEC ID number of contributing
federal political committee.

C

Name of Employer

HELEN NEWBERRY JOY HOSPITAL

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

216.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 19 / 2009

Transaction ID : SA11AI.106950

Amount of Each Receipt this Period

216.00

Full Name (Last, First, Middle Initial)

B. BETSY BENNETT

Mailing Address 537 LAWRENCE

City

WAYLAND

State

MI

Zip Code

49348

FEC ID number of contributing
federal political committee.

C

Name of Employer

HELEN NEWBERRY JOY HOSPITAL

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

236.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2009

Transaction ID : SA11AI.106785

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. THOMAS BETHUNE

Mailing Address 3737 TRINITY HILLS LN

City

EULESS

State

TX

Zip Code

76040-7256

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11AI.106923

Amount of Each Receipt this Period

25.00

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

261.00

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)

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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 (Last, First, Middle Initial)

A. ROY DON BEVIS

Mailing Address 226 PENNSYLVANIA AVENUE

City
LEBANON

State Zip Code
TN 37087

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2009

Transaction ID : SA11Al.107607

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. MICHAEL D BEYERS

Mailing Address 7057 W 200 S

City
NEW PALESTINE

State Zip Code
IN 46163-9772

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVISTAR INTERNATIONAL CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106716

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. BRADLY S BINGHAM

Mailing Address 409 CAROLINA AVE

City
BRISTOL

State Zip Code
TN 37620-2403

FEC ID number of contributing
federal political committee.

C

Name of Employer

DANA CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 19 / 2009

Transaction ID : SA11Al.107539

Amount of Each Receipt this Period

300.00

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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Detailed Summary Page

FOR LINE NUMBER: PAGE 10 OF 235

(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 (Last, First, Middle Initial)

A. **RALPH E BISHOP**

Mailing Address 8720 N JEFFERSON

City
KANSAS CITY

State Zip Code
MO 64155

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2009

Transaction ID : SA11Al.107596

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. **PAUL BLUTO**

Mailing Address 1525 KROEGER AVE

City
FULLERTON

State Zip Code
CA 92631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106657

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. **TIMOTHY J BOLEY**

Mailing Address 492 HIGHWAY 287

City
VILONIA

State Zip Code
AZ 72173-9641

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN TRANSPORTATION CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2009

Transaction ID : SA11Al.106898

Amount of Each Receipt this Period

52.00

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

652.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER: PAGE 11 OF 235
(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 (Last, First, Middle Initial)

A. TIMOTHY J BOLEY

Mailing Address 492 HIGHWAY 287

City

VILONIA

State

AZ

Zip Code

72173-9641

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 03 / 2009

Transaction ID : SA11Al.107593

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

B. TIMOTHY J BOLEY

Mailing Address 492 HIGHWAY 287

City

VILONIA

State

AZ

Zip Code

72173-9641

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2009

Transaction ID : SA11Al.107514

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

C. MATTHEW BOLLINGER

Mailing Address 1020 CHOCTAW TRAILS

City

BLANCHARD

State

OK

Zip Code

73010

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106663

Amount of Each Receipt this Period

300.00

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

352.00

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 235
(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 (Last, First, Middle Initial)

A. WESLEY G BONNER

Mailing Address PO BOX 212

City
EUSTACE

State
TX

Zip Code
75124-0212

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106750

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. DAVID BORTZ

Mailing Address 112 CARRIAGE OAKS DRIVE

City
COLUMBIA

State
SC

Zip Code
29229-9302

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

INTERNATIONAL REPRESENTATIVE

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
06 / 19 / 2009

Transaction ID : SA11Al.107489

Amount of Each Receipt this Period

275.00

Full Name (Last, First, Middle Initial)

C. BRENT E BROOKS

Mailing Address 143 RED RIVER RD

City
NEW CASTLE

State
IN

Zip Code
47362-1135

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106722

Amount of Each Receipt this Period

25.00

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

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

325.00

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 (Last, First, Middle Initial)

A. SHANNON BROWN

Mailing Address 200 JACK PORTER ROAD

City

LAFAYETTE

State

MI

Zip Code

37083

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 22 / 2009

Transaction ID : SA11Al.107612

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. WILLIAM J BROWN

Mailing Address P.O. BOX 352

City

RUTHERFORD

State

TN

Zip Code

38369-0352

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

06 / 02 / 2009

Transaction ID : SA11Al.107513

Amount of Each Receipt this Period

70.00

Full Name (Last, First, Middle Initial)

C. SANCHIONI BUTLER

Mailing Address 1207 SUZANNA DRIVE

City

RAYMOND

State

MS

Zip Code

39154

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

375.00

Date of Receipt

05 / 19 / 2009

Transaction ID : SA11Al.106732

Amount of Each Receipt this Period

300.00

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

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

670.00

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 (Last, First, Middle Initial)

A. SANCHIONI BUTLER

Mailing Address 1207 SUZANNA DRIVE

City State Zip Code
 RAYMOND MS 39154

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INTERNATIONAL UNION, UAW

Occupation
 INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 19 / 2009

Transaction ID : SA11AI.107589

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. SONIA P CALDERON

Mailing Address 1201 CASA LN

City State Zip Code
 VENUS TX 76084

FEC ID number of contributing
federal political committee.

C

Name of Employer
 NAVISTAR INTERNATIONAL CORP

Occupation
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 03 / 30 / 2009

Transaction ID : SA11AI.106833

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. MICHAEL CAVANAUGH

Mailing Address 26330 JEFFERSON AVENUE

City State Zip Code
 ST CLAIR SHORES MI 48081-2429

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 04 / 06 / 2009

Transaction ID : SA11AI.106760

Amount of Each Receipt this Period

300.00

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

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

400.00

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 (Last, First, Middle Initial)

A. FREDDIE D CHARLES

Mailing Address 300 WATER ST

City

LYONS

State

MI

Zip Code

48851

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

05 / 27 / 2009

Transaction ID : SA11AI.106794

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

B. FREDDIE D CHARLES

Mailing Address 300 WATER ST

City

LYONS

State

MI

Zip Code

48851

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

310.00

Date of Receipt

06 / 01 / 2009

Transaction ID : SA11AI.107583

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. FREDDIE D CHARLES

Mailing Address 300 WATER ST

City

LYONS

State

MI

Zip Code

48851

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

360.00

Date of Receipt

06 / 02 / 2009

Transaction ID : SA11AI.107502

Amount of Each Receipt this Period

50.00

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

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

360.00

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 (Last, First, Middle Initial)

A. LEWIS COLLINS

Mailing Address 4558 ORIOLE ST

City

MUSKEGON

State

MI

Zip Code

49444-4458

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL DYNAMICS CORP

Occupation

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
03 / 19 / 2009

Transaction ID : SA11AI.107310

Amount of Each Receipt this Period

310.00

Full Name (Last, First, Middle Initial)

B. RAYMUNDO CONTRERAS

Mailing Address 12812 HARVEST AVE.

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11AI.106630

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. RAYMUNDO CONTRERAS

Mailing Address 12812 HARVEST AVE.

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2009

Transaction ID : SA11AI.106628

Amount of Each Receipt this Period

8.50

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

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

618.50

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 (Last, First, Middle Initial)

A. RAYMUNDO CONTRERAS

Mailing Address 12812 HARVEST AVE.

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

317.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11Al.106629

Amount of Each Receipt this Period

8.50

Full Name (Last, First, Middle Initial)

B. RAYMUNDO CONTRERAS

Mailing Address 12812 HARVEST AVE.

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

359.50

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2009

Transaction ID : SA11Al.107477

Amount of Each Receipt this Period

42.50

Full Name (Last, First, Middle Initial)

C. ROBERT L COOPER

Mailing Address 12358 GEIST COVE DR

City

INDIANAPOLIS

State

IN

Zip Code

46236-7244

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106945

Amount of Each Receipt this Period

25.00

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

76.00

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 (Last, First, Middle Initial)

A. DARRELL COULTER

Mailing Address 3111 RIVERS BEND SOUTH

City State Zip Code
 BONNE TERRE MO 63628

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 04 / 2009

Transaction ID : SA11AI.106658

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. KEVIN P CRADIC

Mailing Address 599 N KNIGHTSTOWN RD

City State Zip Code
 SHELBYVILLE IN 46176-9577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 26 / 2009

Transaction ID : SA11AI.106728

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. KEVIN P CRADIC

Mailing Address 599 N KNIGHTSTOWN RD

City State Zip Code
 SHELBYVILLE IN 46176-9577

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 30 / 2009

Transaction ID : SA11AI.106780

Amount of Each Receipt this Period

25.00

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

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

350.00

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MAURICE DAVISON

Mailing Address 5331 HOLLY SPRINGS DR E

City State Zip Code
 INDIANAPOLIS IN 46254

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 13 / 2009

Transaction ID : SA11AI.106940

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. SHAWN B DEAN

Mailing Address P.O. BOX 1214

City State Zip Code
 STERLING HEIGHTS MI 48311

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 11 / 2009

Transaction ID : SA11AI.107443

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. KENNETH E DEARING

Mailing Address 150 CUIVRE RIDGE DR

City State Zip Code
 TROY MO 63379-6313

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 04 / 2009

Transaction ID : SA11AI.106665

Amount of Each Receipt this Period

300.00

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 (Last, First, Middle Initial)

A. JOHN DEWOLF

Mailing Address 4995 WILCOX

City
MONTAGUE

State Zip Code
MI 49437

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL DYNAMICS CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 19 / 2009

Transaction ID : SA11Al.107317

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. DEREK L DUFF

Mailing Address 1735 WARREN HOLLOW RD

City
NOLENSVILLE

State Zip Code
TN 37135-9418

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

206.25

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 28 / 2009

Transaction ID : SA11Al.106783

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. OLIVER EDMONDSON

Mailing Address 3217 KIESTWOOD DR

City
DALLAS

State Zip Code
TX 75233-2821

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVISTAR INTERNATIONAL CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106928

Amount of Each Receipt this Period

25.00

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

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

350.00

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 (Last, First, Middle Initial)

A. DANIEL FAIRBANKS

Mailing Address 6302 LAROCQUE CIR

City
LANSING

State Zip Code
MI 48917-9740

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11AI.106640

Amount of Each Receipt this Period

315.00

Full Name (Last, First, Middle Initial)

B. DANIEL FAIRBANKS

Mailing Address 6302 LAROCQUE CIR

City
LANSING

State Zip Code
MI 48917-9740

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

365.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 03 / 2009

Transaction ID : SA11AI.106926

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. DANIEL FAIRBANKS

Mailing Address 6302 LAROCQUE CIR

City
LANSING

State Zip Code
MI 48917-9740

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

390.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107546

Amount of Each Receipt this Period

25.00

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

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

390.00

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 (Last, First, Middle Initial)

A. GERALD FINNEGAN

Mailing Address 517 WATKINS ST.

City
CONWAY

State
AR

Zip Code
72034-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

06 / 03 / 2009

Transaction ID : SA11AI.107524

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

B. GERALD FINNEGAN

Mailing Address 517 WATKINS ST.

City
CONWAY

State
AR

Zip Code
72034-5126

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

234.00

Date of Receipt

06 / 23 / 2009

Transaction ID : SA11AI.107510

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

C. JAMES FOSTER

Mailing Address 7300 MURKINS RD

City
KANSAS CITY

State
MO

Zip Code
64133-7002

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

06 / 11 / 2009

Transaction ID : SA11AI.107452

Amount of Each Receipt this Period

70.00

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

122.00

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

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

Use separate schedule(s)
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(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 (Last, First, Middle Initial)

A. LINDA FRANCIS

Mailing Address PO BOX 7770

City
FLINT

State Zip Code
MI 48507-0770

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106649

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. LINDA FRANCIS

Mailing Address PO BOX 7770

City
FLINT

State Zip Code
MI 48507-0770

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

425.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11Al.106666

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. LINDA FRANCIS

Mailing Address PO BOX 7770

City
FLINT

State Zip Code
MI 48507-0770

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2009

Transaction ID : SA11Al.106883

Amount of Each Receipt this Period

50.00

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)
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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 (Last, First, Middle Initial)

A. LINDA FRANCIS

Mailing Address PO BOX 7770

City
FLINT

State
MI

Zip Code
48507-0770

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 11 / 2009

Transaction ID : SA11AI.107493

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. RANDALL S FREEMAN

Mailing Address 1122 HILLGATE WAY

City
LANSING

State
MI

Zip Code
48912-5013

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 27 / 2009

Transaction ID : SA11AI.106799

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

C. RANDALL S FREEMAN

Mailing Address 1122 HILLGATE WAY

City
LANSING

State
MI

Zip Code
48912-5013

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

06 / 11 / 2009

Transaction ID : SA11AI.107587

Amount of Each Receipt this Period

25.00

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)
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Detailed Summary Page

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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 (Last, First, Middle Initial)

A. THOMAS FRICANO

Mailing Address 118 WOODCREST LN

City

EATONTON

State

GA

Zip Code

31024-5431

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

350.00

Date of Receipt

04 / 01 / 2009

Transaction ID : SA11Al.106858

Amount of Each Receipt this Period

350.00

Full Name (Last, First, Middle Initial)

B. MARK FRYE

Mailing Address 1013 MT. ULLA HIGHWAY

City

MOORESVILLE

State

NC

Zip Code

28115

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIMLERCHRYSLER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 11 / 2009

Transaction ID : SA11Al.106953

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MICHELLE GALLAGHER

Mailing Address 416 ROSE AVE.,APT 7

City

VENICE

State

CA

Zip Code

90291

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALIFORNIA (UNIVERSITY OF)

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

210.00

Date of Receipt

06 / 08 / 2009

Transaction ID : SA11Al.107468

Amount of Each Receipt this Period

210.00

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

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

860.00

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

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

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PAGE 26 OF 235

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

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

Full Name (Last, First, Middle Initial)

A. SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City

GRAND PRAIRIE

State

TX

Zip Code

75051-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

MM / DD / YYYY
02 / 06 / 2009

Transaction ID : SA11Al.106660

Amount of Each Receipt this Period

450.00

Full Name (Last, First, Middle Initial)

B. SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City

GRAND PRAIRIE

State

TX

Zip Code

75051-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

750.00

Date of Receipt

MM / DD / YYYY
04 / 03 / 2009

Transaction ID : SA11Al.106809

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. SANDRA GATSON

Mailing Address 1522 LAKECREST ST

City

GRAND PRAIRIE

State

TX

Zip Code

75051-3447

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

900.00

Date of Receipt

MM / DD / YYYY
06 / 11 / 2009

Transaction ID : SA11Al.107494

Amount of Each Receipt this Period

150.00

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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(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 (Last, First, Middle Initial)

A. NATHANIEL GREENE

Mailing Address 17227 HUNTINGTON RD

City
DETROIT

State Zip Code
MI 48219-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11AI.106661

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. NATHANIEL GREENE

Mailing Address 17227 HUNTINGTON RD

City
DETROIT

State Zip Code
MI 48219-3520

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 02 / 2009

Transaction ID : SA11AI.106904

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. EARL F GROVE

Mailing Address 1223 FELTON RD

City
RED LION

State Zip Code
PA 17356-9305

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 11 / 2009

Transaction ID : SA11AI.107311

Amount of Each Receipt this Period

300.00

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

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

700.00

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

Use separate schedule(s)
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Detailed Summary Page

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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 (Last, First, Middle Initial)

A. ALAN L HANBACK

Mailing Address 8438 W 800 N

City
FAIRLAND

State Zip Code
IN 46126-9512

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVISTAR INTERNATIONAL CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID : SA11AI.106869

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. ALAN L HANBACK

Mailing Address 8438 W 800 N

City
FAIRLAND

State Zip Code
IN 46126-9512

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVISTAR INTERNATIONAL CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11AI.106906

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JUDY HARDEN

Mailing Address 8102 SPRING ORCHARD CT

City
LOUISVILLE

State Zip Code
KY 40218

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
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
06 / 01 / 2009

Transaction ID : SA11AI.107557

Amount of Each Receipt this Period

250.00

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

300.00

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

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

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Detailed Summary Page

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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 (Last, First, Middle Initial)

A. DOROTHY A HARRIS

Mailing Address 7865 NW ROANRIDGE ROAD,APT D

City State Zip Code
 KANSAS MO 64151

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

MM / DD / YYYY
 06 / 01 / 2009

Transaction ID : SA11AI.107526

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. DONALD C HAYES

Mailing Address ROUTE 1,BOX 126B

City State Zip Code
 BUNKER MO 63629-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
 02 / 04 / 2009

Transaction ID : SA11AI.106659

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. DONALD C HAYES

Mailing Address ROUTE 1,BOX 126B

City State Zip Code
 BUNKER MO 63629-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

302.00

Date of Receipt

MM / DD / YYYY
 02 / 12 / 2009

Transaction ID : SA11AI.106643

Amount of Each Receipt this Period

2.00

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

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

552.00

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)

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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 (Last, First, Middle Initial)

A. DONALD C HAYES

Mailing Address ROUTE 1,BOX 126B

City
BUNKER

State Zip Code
MO 63629-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

310.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2009

Transaction ID : SA11AI.107599

Amount of Each Receipt this Period

8.00

Full Name (Last, First, Middle Initial)

B. DONALD C HAYES

Mailing Address ROUTE 1,BOX 126B

City
BUNKER

State Zip Code
MO 63629-0000

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

314.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 02 / 2009

Transaction ID : SA11AI.107432

Amount of Each Receipt this Period

4.00

Full Name (Last, First, Middle Initial)

C. PHINIS HUNDLEY

Mailing Address 3576 BARDSTOWN RD.

City
HODGENVILLE

State Zip Code
KY 42748-9314

FEC ID number of contributing
federal political committee.

C

Name of Employer
BARNES GROUP INC

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 13 / 2009

Transaction ID : SA11AI.106653

Amount of Each Receipt this Period

300.00

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

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

312.00

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

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

FOR LINE NUMBER: PAGE 31 OF 235

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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 (Last, First, Middle Initial)

A. PHINIS HUNDLEY

Mailing Address 3576 BARDSTOWN RD.

City

HODGENVILLE

State

KY

Zip Code

42748-9314

FEC ID number of contributing
federal political committee.

C

Name of Employer

BARNES GROUP INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 15 / 2009

Transaction ID : SA11Al.106789

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. RANDY L IULIANO

Mailing Address 5646 THUNDER BAY ST

City

PORTAGE

State

MI

Zip Code

49024-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN AXLE & MANUFACTURING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 29 / 2009

Transaction ID : SA11Al.107306

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. RANDY L IULIANO

Mailing Address 5646 THUNDER BAY ST

City

PORTAGE

State

MI

Zip Code

49024-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN AXLE & MANUFACTURING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

270.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 07 / 2009

Transaction ID : SA11Al.107315

Amount of Each Receipt this Period

20.00

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

370.00

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)

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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 (Last, First, Middle Initial)

A. RANDY L IULIANO

Mailing Address 5646 THUNDER BAY ST

City
PORTAGE

State Zip Code
MI 49024-1139

FEC ID number of contributing
federal political committee.

C

Name of Employer
AMERICAN AXLE & MANUFACTURING

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

279.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 11 / 2009

Transaction ID : SA11Al.107316

Amount of Each Receipt this Period

9.00

Full Name (Last, First, Middle Initial)

B. TAMMY J JONES

Mailing Address 21520 DEQUINDRE

City
WARREN

State Zip Code
MI 48091

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRYSLER

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

297.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2009

Transaction ID : SA11Al.106758

Amount of Each Receipt this Period

297.00

Full Name (Last, First, Middle Initial)

C. TAMMY J JONES

Mailing Address 21520 DEQUINDRE

City
WARREN

State Zip Code
MI 48091

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRYSLER

Occupation
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
06 / 11 / 2009

Transaction ID : SA11Al.107568

Amount of Each Receipt this Period

99.00

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

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

405.00

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 (Last, First, Middle Initial)

A. GERALD KARIEM

Mailing Address 2468 VISTA POINTE CT NW

City State Zip Code
 GRAND RAPIDS MI 49534

FEC ID number of contributing
federal political committee.

C

Name of Employer
 INTERNATIONAL UNION, UAW

Occupation
 INTERNATIONAL REPRESENTATIVE

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
 04 / 13 / 2009

Transaction ID : SA11AI.106706

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer
 UAW LOCAL 598

Occupation
 LOCAL 598 STAFF

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
 02 / 04 / 2009

Transaction ID : SA11AI.106644

Amount of Each Receipt this Period

325.00

Full Name (Last, First, Middle Initial)

C. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer
 UAW LOCAL 598

Occupation
 LOCAL 598 STAFF

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
 02 / 06 / 2009

Transaction ID : SA11AI.106668

Amount of Each Receipt this Period

50.00

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

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

775.00

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 (Last, First, Middle Initial)

A. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 598

Occupation

LOCAL 598 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 03 / 25 / 2009

Transaction ID : SA11Al.106788

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 598

Occupation

LOCAL 598 STAFF

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
 04 / 03 / 2009

Transaction ID : SA11Al.106855

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 598

Occupation

LOCAL 598 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

575.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 12 / 2009

Transaction ID : SA11Al.106688

Amount of Each Receipt this Period

50.00

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 (Last, First, Middle Initial)

A. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 598

Occupation

LOCAL 598 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

625.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 13 / 2009

Transaction ID : SA11Al.106856

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

B. DEBI KIRCHNER

Mailing Address 1165 PARKLANE CIR

City State Zip Code
 GRAND BLANC MI 48439-8053

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 598

Occupation

LOCAL 598 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

675.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 24 / 2009

Transaction ID : SA11Al.107629

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. JOSEPH KISER

Mailing Address 2786 CANTERBURY ST

City State Zip Code
 TRENTON MI 48183-4158

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 06 / 11 / 2009

Transaction ID : SA11Al.107630

Amount of Each Receipt this Period

60.00

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

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

160.00

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 (Last, First, Middle Initial)

A. HANK LACAYO

Mailing Address 3403 BEAR CREEK DR

City State Zip Code
 NEWBURY PARK CA 91320

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 04 2009

Transaction ID : SA11Al.106641

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. BRUCE ALLEN LEE

Mailing Address 6500 S ROSEMEAD BLVD

City State Zip Code
 PICO RIVERA CA 90660

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

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
 02 04 2009

Transaction ID : SA11Al.106671

Amount of Each Receipt this Period

270.00

Full Name (Last, First, Middle Initial)

C. FRANCIS LE MAY

Mailing Address 104 SOUTH MURPHY AVENUE

City State Zip Code
 BRAZIL IN 47834-8296

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 28 2009

Transaction ID : SA11Al.106901

Amount of Each Receipt this Period

300.00

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

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

870.00

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 (Last, First, Middle Initial)

A. GERHARD E LINNER

Mailing Address 557 WEST THIRD ST

City

MANSFIELD

State

OH

Zip Code

44906-2648

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 03 / 2009

Transaction ID : SA11Al.106726

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. NUVIA LOMBINO

Mailing Address 12314 HIGH MEADOW DR

City

DALLAS

State

TX

Zip Code

75234-7952

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106751

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. THOMAS L MAPLES

Mailing Address P.O. BOX 456

City

CRANE

State

MO

Zip Code

65633-0456

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 12 / 2009

Transaction ID : SA11Al.106937

Amount of Each Receipt this Period

300.00

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

625.00

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 (Last, First, Middle Initial)

A. THOMAS L MAPLES

Mailing Address P.O. BOX 456

City
CRANE

State
MO

Zip Code
65633-0456

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

334.00

Date of Receipt

06 / 01 / 2009

Transaction ID : SA11Al.107467

Amount of Each Receipt this Period

34.00

Full Name (Last, First, Middle Initial)

B. THOMAS L MAPLES

Mailing Address P.O. BOX 456

City
CRANE

State
MO

Zip Code
65633-0456

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

351.00

Date of Receipt

06 / 02 / 2009

Transaction ID : SA11Al.107522

Amount of Each Receipt this Period

17.00

Full Name (Last, First, Middle Initial)

C. RONALD D MARSH

Mailing Address 3697 LAKESHORE CT

City
GREENWOOD

State
IN

Zip Code
46143-8355

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 30 / 2009

Transaction ID : SA11Al.106865

Amount of Each Receipt this Period

25.00

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

76.00

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 (Last, First, Middle Initial)

A. HOMER W MARSHALL

Mailing Address 1016 HEATHERFIELD AVE

City State Zip Code
 ROSAMOND CA 93560-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 BOEING COMPANY 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
 03 17 2009

Transaction ID : SA11Al.106846

Amount of Each Receipt this Period

175.00

Full Name (Last, First, Middle Initial)

B. HOMER W MARSHALL

Mailing Address 1016 HEATHERFIELD AVE

City State Zip Code
 ROSAMOND CA 93560-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 BOEING COMPANY 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
 04 14 2009

Transaction ID : SA11Al.106920

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. HOMER W MARSHALL

Mailing Address 1016 HEATHERFIELD AVE

City State Zip Code
 ROSAMOND CA 93560-6612

FEC ID number of contributing
federal political committee.

C

Name of Employer Occupation
 BOEING COMPANY 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
 05 14 2009

Transaction ID : SA11Al.106826

Amount of Each Receipt this Period

25.00

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

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

225.00

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 (Last, First, Middle Initial)

A. HOMER W MARSHALL

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

BOEING COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
06 / 04 / 2009

Transaction ID : SA11AI.107610

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. FRANK MARTIN

Mailing Address 7669 WINTERBERRY DRIVE

City

YOUNGSTOWN

State

OH

Zip Code

44512-4723

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 19 / 2009

Transaction ID : SA11AI.106646

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. EDWARD E MAY

Mailing Address 8192 E OUTER DRIVE

City

DETROIT

State

MI

Zip Code

48213

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

MM / DD / YYYY
06 / 11 / 2009

Transaction ID : SA11AI.107435

Amount of Each Receipt this Period

60.00

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

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

385.00

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 (Last, First, Middle Initial)

A. RICHARD B MELZNER

Mailing Address 5107 RAINTREE DR

City

PITTSBURGH

State

PA

Zip Code

15236-1506

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 12 / 2009

Transaction ID : SA11AI.106822

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. A MEMMO

Mailing Address 9715 LAKESHORE RD

City

ANGOLA

State

NY

Zip Code

14006

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 01 / 2009

Transaction ID : SA11AI.107491

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. JEFFREY A MOONEY

Mailing Address 1006 LANCASHIRE LN

City

PENDLETON

State

IN

Zip Code

46064-9127

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2009

Transaction ID : SA11AI.106927

Amount of Each Receipt this Period

25.00

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

575.00

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 (Last, First, Middle Initial)

A. JEFFREY A MOONEY

Mailing Address 1006 LANCASHIRE LN

City
PENDLETON

State Zip Code
IN 46064-9127

FEC ID number of contributing
federal political committee.

C

Name of Employer
NAVISTAR INTERNATIONAL CORP

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11AI.106851

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. BRIAN SCOTT MOORE

Mailing Address 2770 EASTERN AVE

City
BEDFORD

State Zip Code
IN 47421-5327

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

366.00

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 15 / 2009

Transaction ID : SA11AI.106885

Amount of Each Receipt this Period

360.00

Full Name (Last, First, Middle Initial)

C. BRIAN SCOTT MOORE

Mailing Address 2770 EASTERN AVE

City
BEDFORD

State Zip Code
IN 47421-5327

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

369.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107453

Amount of Each Receipt this Period

3.00

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

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

388.00

SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DELBERT L MORRIS

Mailing Address 308 CREEKSTONE CT

City

INDIANAPOLIS

State

IN

Zip Code

46239-9172

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03	/	30	/	2009

Transaction ID : SA11Al.106922

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. JOHN C MORRIS

Mailing Address 1116 SOUTHWINDS DR

City

PORT ORANGE

State

FL

Zip Code

32129-7835

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
06	/	19	/	2009

Transaction ID : SA11Al.107577

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MICHAEL L MUND

Mailing Address 141 HILL ST

City

BONNE TERRE

State

MO

Zip Code

63628-1739

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEAR CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
02	/	04	/	2009

Transaction ID : SA11Al.106652

Amount of Each Receipt this Period

300.00

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

625.00

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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(check only one)

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CHARLES NASSAR

Mailing Address 9445 CR 2400

City
QUINLAN

State
TX

Zip Code
75474

FEC ID number of contributing
federal political committee.

C

Name of Employer

LEAR

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106634

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. GEORGE NELSON

Mailing Address 1442 ORCHARDVIEW AVE N W

City
SALEM

State
OR

Zip Code
97304

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106647

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. SYLVIA Y NELSON

Mailing Address P.O.BOX 441785

City
DETROIT

State
MI

Zip Code
48244

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11Al.107465

Amount of Each Receipt this Period

60.00

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)
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DONALD OETMAN

Mailing Address 3250 LAKEVIEW DRIVE

City
ALLEGAN

State Zip Code
MI 49010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 25 / 2009

Transaction ID : SA11Al.106753

Amount of Each Receipt this Period

400.00

Full Name (Last, First, Middle Initial)

B. DAVID OFFENHEISER

Mailing Address 6122 E HIGGINS LAKE DR

City
ROSCOMMON

State Zip Code
MI 48653-9351

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
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
06 / 01 / 2009

Transaction ID : SA11Al.107498

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

C. STEPHEN R OVERTURF

Mailing Address 1843 BISCAYNE DR

City
SPRINGFIELD

State Zip Code
OH 45503-6010

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 20 / 2009

Transaction ID : SA11Al.106704

Amount of Each Receipt this Period

35.00

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

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

685.00

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 (Last, First, Middle Initial)

A. STEPHEN R OVERTURF

Mailing Address 1843 BISCAYNE DR

City

SPRINGFIELD

State

OH

Zip Code

45503-6010

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 26 / 2009

Transaction ID : SA11Al.106821

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. STEPHEN R OVERTURF

Mailing Address 1843 BISCAYNE DR

City

SPRINGFIELD

State

OH

Zip Code

45503-6010

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106759

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. NARMELIN OVRAHIM

Mailing Address 1221 KEVIN WAY

City

TURLOCK

State

CA

Zip Code

95382-1318

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALIFORNIA STATE UNIVERSITY

Occupation

CLERICAL WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.80

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 14 / 2009

Transaction ID : SA11Al.106834

Amount of Each Receipt this Period

80.78

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

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

150.78

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 (Last, First, Middle Initial)

A. MARK PARKER

Mailing Address 207 LESLIE ST

City
LANSING

State Zip Code
MI 48912-2720

FEC ID number of contributing
federal political committee.

C

Name of Employer
UAW LOCAL UNION 2256

Occupation
LOCAL UNION OFFICER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 02 / 2009

Transaction ID : SA11AI.107529

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. GEORGETTA PAULIN

Mailing Address 1026 WEST IRVIN AVENUE

City
HAGERSTOWN

State Zip Code
MD 21742

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERNATIONAL UNION, UAW

Occupation
UNION STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 19 / 2009

Transaction ID : SA11AI.107575

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. GARY W PERKINS

Mailing Address 4858 WORTH STREET

City
MILLINGTON

State Zip Code
MI 48746

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRYSLER LLC

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107523

Amount of Each Receipt this Period

60.00

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

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

610.00

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 (Last, First, Middle Initial)

A. JEFFREY F PIETRZYK

Mailing Address 231 FAIRVIEW CT

City

GRAND ISLAND

State

NY

Zip Code

14072-2962

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 24 / 2009

Transaction ID : SA11Al.107476

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. DEAN POGGIALI

Mailing Address 16181 ESKES ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL UNION 724

Occupation

LOCAL 724 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

06 / 02 / 2009

Transaction ID : SA11Al.107637

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. DEAN POGGIALI

Mailing Address 16181 ESKES ST

City

LANSING

State

MI

Zip Code

48906-1902

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL UNION 724

Occupation

LOCAL 724 STAFF

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

06 / 23 / 2009

Transaction ID : SA11Al.107634

Amount of Each Receipt this Period

100.00

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)
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. TIMOTHY R POOLE

Mailing Address 3351 S 700 W

City

NEW PALESTINE

State

IN

Zip Code

46163-9749

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11AI.106893

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. BRADLEY POPE

Mailing Address 5250 ALEXANDER ROAD

City

DUBLIN

State

VA

Zip Code

24084

FEC ID number of contributing
federal political committee.

C

Name of Employer

INTERNATIONAL UNION, UAW

Occupation

INTERNATIONAL REPRESENTATIVE

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 13 / 2009

Transaction ID : SA11AI.106852

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. PAUL E PORT

Mailing Address 1714 14TH AVE

City

MENOMINEE

State

MI

Zip Code

49858-2548

FEC ID number of contributing
federal political committee.

C

Name of Employer

JONES L E COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 08 / 2009

Transaction ID : SA11AI.107312

Amount of Each Receipt this Period

300.00

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

625.00

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 (Last, First, Middle Initial)

A. JERRY RAGSTER

Mailing Address 708 PITTMAN ST

City
LONGVIEW

State Zip Code
TX 75602

FEC ID number of contributing
federal political committee.

C

Name of Employer

GK TECHNOLOGIES

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.00

Date of Receipt

06 / 04 / 2009

Transaction ID : SA11AI.107609

Amount of Each Receipt this Period

214.00

Full Name (Last, First, Middle Initial)

B. WILLIAM REAM

Mailing Address 3772 MACARTHUR RD

City
MUSKEGON

State Zip Code
MI 49442-8420

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL DYNAMICS CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

03 / 19 / 2009

Transaction ID : SA11AI.107308

Amount of Each Receipt this Period

320.00

Full Name (Last, First, Middle Initial)

C. JOHN L ROBERTS

Mailing Address 400 WATERFALL ROAD E

City
HEBER SPRINGS

State Zip Code
AR 72543-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

208.00

Date of Receipt

06 / 03 / 2009

Transaction ID : SA11AI.107444

Amount of Each Receipt this Period

26.00

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

560.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOHN L ROBERTS

Mailing Address 400 WATERFALL ROAD E

City

HEBER SPRINGS

State

AR

Zip Code

72543-8123

FEC ID number of contributing
federal political committee.

C

Name of Employer

AMERICAN TRANSPORTATION CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

234.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 23 / 2009

Transaction ID : SA11Al.107541

Amount of Each Receipt this Period

26.00

Full Name (Last, First, Middle Initial)

B. ROLAND C RUSIE JR

Mailing Address 251 S AUDUBON RD

City

INDIANAPOLIS

State

IN

Zip Code

46219-7228

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106718

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. GARY SANDERS

Mailing Address 14910 GARFIELD AVE

City

PARAMOUNT

State

CA

Zip Code

90723-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 887

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
03 / 17 / 2009

Transaction ID : SA11Al.106837

Amount of Each Receipt this Period

175.00

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

226.00

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

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☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GARY SANDERS

Mailing Address 14910 GARFIELD AVE

City

PARAMOUNT

State

CA

Zip Code

90723-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 887

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

250.00

Date of Receipt

04 / 14 / 2009

Transaction ID : SA11AI.106939

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. GARY SANDERS

Mailing Address 14910 GARFIELD AVE

City

PARAMOUNT

State

CA

Zip Code

90723-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 887

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

275.00

Date of Receipt

05 / 14 / 2009

Transaction ID : SA11AI.106838

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. GARY SANDERS

Mailing Address 14910 GARFIELD AVE

City

PARAMOUNT

State

CA

Zip Code

90723-3415

FEC ID number of contributing
federal political committee.

C

Name of Employer

UAW LOCAL 887

Occupation

LOCAL UNION OFFICER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 04 / 2009

Transaction ID : SA11AI.107505

Amount of Each Receipt this Period

25.00

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

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

75.00

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

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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 (Last, First, Middle Initial)

A. KELLY SANTIMAN

Mailing Address 1060 ROGERS LANE

City

LEBANON

State

TN

Zip Code

37087

FEC ID number of contributing
federal political committee.

C

Name of Employer

GENERAL MOTORS

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 22 / 2009

Transaction ID : SA11Al.107605

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. NED SCOTT

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

BOEING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106664

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. RONALD M SMITH

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

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 22 / 2009

Transaction ID : SA11Al.106725

Amount of Each Receipt this Period

300.00

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

900.00

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

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

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

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

Full Name (Last, First, Middle Initial)

A. RONALD M SMITH

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

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

320.00

Date of Receipt

06 / 01 / 2009

Transaction ID : SA11AI.107535

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

B. RONALD M SMITH

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

GENERAL MOTORS CORPORATION

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

06 / 02 / 2009

Transaction ID : SA11AI.107536

Amount of Each Receipt this Period

10.00

Full Name (Last, First, Middle Initial)

C. RUSTY E SMITH

Mailing Address 6972 STATE ROUTE 29

City

MECHANICSBURG

State

OH

Zip Code

43044-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

210.00

Date of Receipt

03 / 20 / 2009

Transaction ID : SA11AI.106847

Amount of Each Receipt this Period

35.00

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

65.00

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 (Last, First, Middle Initial)

A. RUSTY E SMITH

Mailing Address 6972 STATE ROUTE 29

City

MECHANICSBURG

State

OH

Zip Code

43044-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

245.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 26 / 2009

Transaction ID : SA11Al.106804

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

B. RUSTY E SMITH

Mailing Address 6972 STATE ROUTE 29

City

MECHANICSBURG

State

OH

Zip Code

43044-9712

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR INTERNATIONAL CORP

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

280.00

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 30 / 2009

Transaction ID : SA11Al.106896

Amount of Each Receipt this Period

35.00

Full Name (Last, First, Middle Initial)

C. FRANK SOUZA

Mailing Address 33887 FLORA SPRINGS ST

City

TEMECULA

State

CA

Zip Code

92592

FEC ID number of contributing
federal political committee.

C

Name of Employer

BOEING

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106670

Amount of Each Receipt this Period

300.00

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

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

370.00

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 (Last, First, Middle Initial)

A. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 07 / 2009

Transaction ID : SA11Al.106811

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y
 05 / 21 / 2009

Transaction ID : SA11Al.106745

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing
federal political committee.

C

Name of Employer

ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 08 / 2009

Transaction ID : SA11Al.107482

Amount of Each Receipt this Period

50.00

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

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

100.00

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 (Last, First, Middle Initial)

A. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing federal political committee.

C

Name of Employer

ALCOA INC

Occupation

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
 06 / 12 / 2009

Transaction ID : SA11Al.107496

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

B. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing federal political committee.

C

Name of Employer

ALCOA INC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

M M / D D / Y Y Y Y Y
 06 / 15 / 2009

Transaction ID : SA11Al.107450

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

C. JIMMIE SPATES

Mailing Address 5305 NORTHFIELD RD APT 106

City State Zip Code
 BEDFORD HEIGHTS OH 44146

FEC ID number of contributing federal political committee.

C

Name of Employer

ALCOA INC

Occupation

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
 06 / 23 / 2009

Transaction ID : SA11Al.107573

Amount of Each Receipt this Period

50.00

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

100.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MARK A STONER

Mailing Address 2415 ROSS STREET

City

NORTHWOOD

State

OH

Zip Code

43619-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIMLERCHRYSLER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

315.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 19 / 2009

Transaction ID : SA11Al.106667

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. MARK A STONER

Mailing Address 2415 ROSS STREET

City

NORTHWOOD

State

OH

Zip Code

43619-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIMLERCHRYSLER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

330.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
05 / 13 / 2009

Transaction ID : SA11Al.106697

Amount of Each Receipt this Period

15.00

Full Name (Last, First, Middle Initial)

C. MARK A STONER

Mailing Address 2415 ROSS STREET

City

NORTHWOOD

State

OH

Zip Code

43619-1417

FEC ID number of contributing
federal political committee.

C

Name of Employer

DAIMLERCHRYSLER

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11Al.107509

Amount of Each Receipt this Period

5.00

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

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

320.00

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 (Last, First, Middle Initial)

A. JIMMY STOUFER SR

Mailing Address 315 E LONGFELLOW ST

City

KANSAS CITY

State

MO

Zip Code

64119-1728

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

MM / DD / YYYY
02 / 06 / 2009

Transaction ID : SA11AI.106631

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. JIMMY STOUFER SR

Mailing Address 315 E LONGFELLOW ST

City

KANSAS CITY

State

MO

Zip Code

64119-1728

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

350.00

Date of Receipt

MM / DD / YYYY
04 / 02 / 2009

Transaction ID : SA11AI.106936

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. JIMMY STOUFER SR

Mailing Address 315 E LONGFELLOW ST

City

KANSAS CITY

State

MO

Zip Code

64119-1728

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

375.00

Date of Receipt

MM / DD / YYYY
06 / 11 / 2009

Transaction ID : SA11AI.107560

Amount of Each Receipt this Period

25.00

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

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

375.00

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 (Last, First, Middle Initial)

A. JOSEPH L SUMMIT

Mailing Address 1223 BF BUCHANAN HWY

City State Zip Code
SALTVILLE VA 24370-4188

FEC ID number of contributing
federal political committee.

C

Name of Employer
UNIVERSITY OF CALIFORNIA

Occupation
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
05 / 11 / 2009

Transaction ID : SA11Al.106830

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. CHARLES R SUTTON

Mailing Address 129 WASHINGTON

City State Zip Code
MOUNT CLEMENS MI 48043

FEC ID number of contributing
federal political committee.

C

Name of Employer
CHRYSLER

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11Al.107442

Amount of Each Receipt this Period

60.00

Full Name (Last, First, Middle Initial)

C. CHRISTOPHERJ SZABO

Mailing Address 4523 NEWBERRY ST

City State Zip Code
WAYNE MI 48184-2171

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

756.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11Al.106662

Amount of Each Receipt this Period

756.00

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

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

1116.00

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

Use separate schedule(s)
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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 (Last, First, Middle Initial)

A. CHRISTOPHERJ SZABO

Mailing Address 4523 NEWBERRY ST

City

WAYNE

State

MI

Zip Code

48184-2171

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1260.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 02 / 2009

Transaction ID : SA11AI.106807

Amount of Each Receipt this Period

504.00

Full Name (Last, First, Middle Initial)

B. CHRISTOPHERJ SZABO

Mailing Address 4523 NEWBERRY ST

City

WAYNE

State

MI

Zip Code

48184-2171

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1512.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107550

Amount of Each Receipt this Period

252.00

Full Name (Last, First, Middle Initial)

C. MELVIN THOMPSON JR

Mailing Address 5722 PERRYTOWN DR

City

WEST BLOOMFIELD

State

MI

Zip Code

48322-1504

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

240.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107621

Amount of Each Receipt this Period

60.00

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

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

816.00

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 (Last, First, Middle Initial)

A. CLARENCE L TOWNS

Mailing Address 4569 CREEK FORD DR

City
DULUTH

State Zip Code
GA 30096-7204

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2009

Transaction ID : SA11Al.107457

Amount of Each Receipt this Period

210.00

Full Name (Last, First, Middle Initial)

B. ROBERT TROUTMAN

Mailing Address 1266 E ROSE CENTER RD

City
HOLLY

State Zip Code
MI 48442-8643

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 22 / 2009

Transaction ID : SA11Al.107460

Amount of Each Receipt this Period

120.00

Full Name (Last, First, Middle Initial)

C. DANNY TRULL

Mailing Address P O BOX 2040

City
WAXAHACHIE

State Zip Code
TX 75168-2040

FEC ID number of contributing
federal political committee.

C

Name of Employer
INTERNATIONAL UNION, UAW

Occupation
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
02 / 04 / 2009

Transaction ID : SA11Al.106655

Amount of Each Receipt this Period

300.00

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

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

630.00

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

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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. TEDDY TUCKER

Mailing Address 11034 LIV 2313

City

CHILLICOTHE

State

MO

Zip Code

64601

FEC ID number of contributing
federal political committee.

C

Name of Employer

CATERPILLAR

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

335.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106638

Amount of Each Receipt this Period

335.00

Full Name (Last, First, Middle Initial)

B. R VILLASENOR

Mailing Address 12703 CROSSDALE

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11Al.106656

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. R VILLASENOR

Mailing Address 12703 CROSSDALE

City

NORWALK

State

CA

Zip Code

90650

FEC ID number of contributing
federal political committee.

C

Name of Employer

FORD MOTOR COMPANY

Occupation

FACTORY WORKER

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

304.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 05 / 2009

Transaction ID : SA11Al.106637

Amount of Each Receipt this Period

4.00

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

639.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. R VILLASENOR

Mailing Address 12703 CROSSDALE

City
NORWALK

State Zip Code
CA 90650

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

308.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11AI.106627

Amount of Each Receipt this Period

4.00

Full Name (Last, First, Middle Initial)

B. R VILLASENOR

Mailing Address 12703 CROSSDALE

City
NORWALK

State Zip Code
CA 90650

FEC ID number of contributing
federal political committee.

C

Name of Employer
FORD MOTOR COMPANY

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

328.00

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 01 / 2009

Transaction ID : SA11AI.107448

Amount of Each Receipt this Period

20.00

Full Name (Last, First, Middle Initial)

C. GLENN VINSON

Mailing Address 13370 CHEF MENTEUR HWY

City
NEW ORLEANS

State Zip Code
LA 70129

FEC ID number of contributing
federal political committee.

C

Name of Employer
PROCTOR & GAMBLE

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 04 / 2009

Transaction ID : SA11AI.106635

Amount of Each Receipt this Period

300.00

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

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

324.00

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

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DENNIS J VOYTKO

Mailing Address 12215 BERLIN STATION RD

City State Zip Code
 BERLIN CENTER OH 44401

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GENERAL MOTORS CORPORATION

Occupation
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 13 / 2009

Transaction ID : SA11Al.106669

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

B. SCOTT WATTS

Mailing Address 2808 PAMELA PLACE

City State Zip Code
 MINDEN NV 89423

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation
 RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 04 / 2009

Transaction ID : SA11Al.106632

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. MIKE WELCH

Mailing Address 1952 WILDER CT

City State Zip Code
 HASLETT MI 48840-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer
 GENERAL MOTORS CORPORATION

Occupation
 FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 02 / 04 / 2009

Transaction ID : SA11Al.106648

Amount of Each Receipt this Period

325.00

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

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

925.00

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 (Last, First, Middle Initial)

A. MIKE WELCH

Mailing Address 1952 WILDER CT

City
HASLETT

State Zip Code
MI 48840-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
02 / 06 / 2009

Transaction ID : SA11AI.106636

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

B. MIKE WELCH

Mailing Address 1952 WILDER CT

City
HASLETT

State Zip Code
MI 48840-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

450.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
04 / 03 / 2009

Transaction ID : SA11AI.106882

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. MIKE WELCH

Mailing Address 1952 WILDER CT

City
HASLETT

State Zip Code
MI 48840-8238

FEC ID number of contributing
federal political committee.

C

Name of Employer
GENERAL MOTORS CORPORATION

Occupation
FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

475.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
06 / 11 / 2009

Transaction ID : SA11AI.107492

Amount of Each Receipt this Period

25.00

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)
for each category of the
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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CORAL WHEELER

Mailing Address 24035 OCEAN AVE

City

TORRANCE

State

CA

Zip Code

90505

FEC ID number of contributing
federal political committee.

C

Name of Employer

CALIFORNIA (UNIVERSITY OF)

Occupation

CLERK

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

227.50

Date of Receipt

06 / 08 / 2009

Transaction ID : SA11Al.107483

Amount of Each Receipt this Period

227.50

Full Name (Last, First, Middle Initial)

B. EDMUND WIANECKI

Mailing Address 1056 INDIANA CT.

City

VENICE

State

CA

Zip Code

90291

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

02 / 04 / 2009

Transaction ID : SA11Al.106645

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

C. SAMUEL WILLIAMS

Mailing Address 5127 UPPER MOUNTAIN ROAD

City

LOCKPORT

State

NY

Zip Code

14094-9605

FEC ID number of contributing
federal political committee.

C

Name of Employer

NAVISTAR

Occupation

FACTORY WORKER

Receipt For:

☐ Primary

☐ General

☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

03 / 30 / 2009

Transaction ID : SA11Al.106781

Amount of Each Receipt this Period

25.00

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

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

552.50

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 (Last, First, Middle Initial)

A. JAMES W WILLIMANN

Mailing Address 311 LOCUST ST

City
NEW HAVEN

State Zip Code
MO 63068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

225.00

Date of Receipt

05 / 13 / 2009

Transaction ID : SA11Al.106755

Amount of Each Receipt this Period

225.00

Full Name (Last, First, Middle Initial)

B. JAMES W WILLIMANN

Mailing Address 311 LOCUST ST

City
NEW HAVEN

State Zip Code
MO 63068

FEC ID number of contributing
federal political committee.

C

Name of Employer

CHRYSLER LLC

Occupation

FACTORY WORKER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

06 / 11 / 2009

Transaction ID : SA11Al.107456

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

C. KENNETH WORLEY

Mailing Address 10337 AIKINSVILLE RD.

City
FORTUNA

State Zip Code
MO 65034

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

05 / 12 / 2009

Transaction ID : SA11Al.106746

Amount of Each Receipt this Period

300.00

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

600.00

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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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROBERT T YEAGER

Mailing Address 1146 SOUTHEAST AVE

City State Zip Code
OAK PARK IL 60304

FEC ID number of contributing
federal political committee.

C

Name of Employer
LEGAL SERVICES FOR NEW YORK

Occupation
CLERK

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
02 17 2009

Transaction ID : SA11AI.106672

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B.

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 ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

100.00

29769.56

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 (Last, First, Middle Initial)

A. U.S. DEPARTMENT OF THE TREASURY

Mailing Address 1500 PENNSYLVANIA AVE, NW

City State Zip Code
 WASHINGTON DC 20220

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

16.21

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2009

Transaction ID : SA15.107644

Amount of Each Receipt this Period

16.21

REFUND 945 TAXES

Full Name (Last, First, Middle Initial)

B.

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 ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

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

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

16.21

16.21

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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

467.61

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2009

Transaction ID : SA17.107329

Amount of Each Receipt this Period

467.61

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

477.91

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2009

Transaction ID : SA17.107334

Amount of Each Receipt this Period

10.30

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

535.87

Date of Receipt

M M / D D / Y Y Y Y Y Y
01 / 31 / 2009

Transaction ID : SA17.107339

Amount of Each Receipt this Period

57.96

INTEREST ON CHECKING

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

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

535.87

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)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROITState
MIZip Code
48226FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

579.76

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
01		31		2009

Transaction ID : SA17.107344

Amount of Each Receipt this Period

43.89

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROITState
MIZip Code
48226FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

922.81

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2009

Transaction ID : SA17.107330

Amount of Each Receipt this Period

343.05

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROITState
MIZip Code
48226FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

930.24

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
02		28		2009

Transaction ID : SA17.107335

Amount of Each Receipt this Period

7.43

INTEREST ON CHECKING

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

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

394.37

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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

977.90

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2009

Transaction ID : SA17.107340

Amount of Each Receipt this Period

47.66

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1010.91

Date of Receipt

M M / D D / Y Y Y Y Y
02 / 28 / 2009

Transaction ID : SA17.107345

Amount of Each Receipt this Period

33.01

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1381.21

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID : SA17.107331

Amount of Each Receipt this Period

370.30

INTEREST ON CHECKING

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

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

450.97

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 235
(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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1388.52

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID : SA17.107336

Amount of Each Receipt this Period

7.31

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1395.38

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID : SA17.107337

Amount of Each Receipt this Period

6.86

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1457.73

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID : SA17.107341

Amount of Each Receipt this Period

62.35

INTEREST ON CHECKING

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

76.52

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)

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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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1494.57

Date of Receipt

M M / D D / Y Y Y Y Y
03 / 31 / 2009

Transaction ID : SA17.107346

Amount of Each Receipt this Period

36.84

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1824.24

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2009

Transaction ID : SA17.107332

Amount of Each Receipt this Period

329.67

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1880.72

Date of Receipt

M M / D D / Y Y Y Y Y
04 / 30 / 2009

Transaction ID : SA17.107342

Amount of Each Receipt this Period

56.48

INTEREST ON CHECKING

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

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

422.99

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 235
(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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City State Zip Code
 DETROIT MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1915.26

Date of Receipt

M M / D D / Y Y Y Y Y Y
 04 / 30 / 2009

Transaction ID : SA17.107347

Amount of Each Receipt this Period

34.54

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City State Zip Code
 DETROIT MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2223.20

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2009

Transaction ID : SA17.107333

Amount of Each Receipt this Period

307.94

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City State Zip Code
 DETROIT MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2229.83

Date of Receipt

M M / D D / Y Y Y Y Y Y
 05 / 31 / 2009

Transaction ID : SA17.107338

Amount of Each Receipt this Period

6.63

INTEREST ON CHECKING

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

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

349.11

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 235
(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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2254.58

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2009

Transaction ID : SA17.107343

Amount of Each Receipt this Period

24.75

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2287.97

Date of Receipt

M M / D D / Y Y Y Y Y
05 / 31 / 2009

Transaction ID : SA17.107348

Amount of Each Receipt this Period

33.39

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2648.83

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID : SA17.107615

Amount of Each Receipt this Period

360.86

INTEREST ON CHECKING

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

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

419.00

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 78 OF 235

☐ 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 (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2656.15

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID : SA17.107616

Amount of Each Receipt this Period

7.32

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

B. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2684.76

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID : SA17.107617

Amount of Each Receipt this Period

28.61

INTEREST ON CHECKING

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROIT

State Zip Code
MI 48226

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2723.93

Date of Receipt

M M / D D / Y Y Y Y Y
06 / 30 / 2009

Transaction ID : SA17.107618

Amount of Each Receipt this Period

39.17

INTEREST ON CHECKING

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

75.10

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

2723.93

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 235

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GREATER WISCONSIN COMMITTEE PAC

Mailing Address PO BOX 861

City	State	Zip Code
MADISON	WI	53701

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

20000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
03		17		2009

Transaction ID : SA16.107303

Amount of Each Receipt this Period

20000.00

REFUNDED CONTRIBUTION

Full Name (Last, First, Middle Initial)

B.

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 ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

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 ▼

Date of Receipt

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Receipt this Period

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

20000.00

20000.00

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

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

A. ALLIED UNION SERVICES

Date of Disbursement



Transaction ID : SB21B.107129

Amount of Each Disbursement this Period

675.09

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Full Name (Last, First, Middle)
B. ALVIN MARSHALL

Date of Disbursement

Mailing Address 401WHITMORE STREET

City	State	Zip Code
WHITMORE	MI	48770

Transaction ID : SB21B.107055

Purpose of Disbursement	REG 1C VCAP PRIZE
-------------------------	-------------------

Amount of Each Disbursement this Period

Age Group	Number of people
13-17	100
18-24	150
25-34	200
35-44	220
45-54	240
55-64	250
65-74	230
75-84	210
85+	190

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)
C. AMERICAN IMAGES BY HILLSTAR

Date of Disbursement

Mailing Address 25 IMSON STREET

City	State	Zip Code
BUFFALO	NY	14210

Transaction ID : SB21B.107140

Purpose of Disbursement	VCAP DIAMOND CLUB JACKETS
-------------------------	---------------------------

Amount of Each Disbursement this Period

3556.26

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

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

4481.35

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

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

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

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

8399.67

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

500.00

Three examples of 3D barcodes are shown, each consisting of a grid of bars of varying heights. The first grid displays the number '02', the second displays '03', and the third displays '2009'. Each grid is divided into sections by vertical lines, and the bars are arranged to represent the digits of the number.

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

250.00

9149.67

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has a series of small rectangular protrusions along its length. The bottom beam has a series of small rectangular protrusions along its length. The vertical supports are located at the ends of the beams and at regular intervals along the bottom beam.

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107395

This refers to the cost of V-CAP incentive offered to encourage Region 5 UAW members and their families to donate to V-CAP.

Form/Schedule:
Transaction ID:

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

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

Category/
Type

Other (specify) ▼

Category/
Type

Other (specify) ▼

Category/
Type

Other (specify) ▼

6338.02

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.106544

This expenditure relates to non-political communications to increase Union and Industry awareness.

Form/Schedule:
Transaction ID:

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

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

**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 87 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C INV#129-60 SWSHTS/HOODIES

Candidate Name

Category/
Type**Transaction ID : SB21B.106966**

Amount of Each Disbursement this Period

1431.43

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1A INV#221-FLEECE BLANKETS

Candidate Name

Category/
Type**Transaction ID : SB21B.106967**

Amount of Each Disbursement this Period

31928.35

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1-C INV#247 VCAP SWEATSHIRTS

Candidate Name

Category/
Type**Transaction ID : SB21B.106978**

Amount of Each Disbursement this Period

181.62

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

33541.40

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C PHOTOGRAPH ITEMS/VCAP FLYR

Candidate Name

Category/
Type**Transaction ID : SB21B.107128**

Amount of Each Disbursement this Period

439.42

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C VCAP WHITE TEES

Candidate Name

Category/
Type**Transaction ID : SB21B.107130**

Amount of Each Disbursement this Period

1037.40

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CUSTOM PROMOTIONS, INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2009

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
SHORT SLEEVE CT SHIRT

Candidate Name

Category/
Type**Transaction ID : SB21B.107139**

Amount of Each Disbursement this Period

774.57

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

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

2251.39

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107128

Restricted class, membership communication fundraising notification .

Form/Schedule:
Transaction ID:

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 90 OF 235

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C INVOICE #353 V-CAP SHIRTS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 20 / 2009

Transaction ID : SB21B.107141

Amount of Each Disbursement this Period

75.54

Full Name (Last, First, Middle Initial)

B. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C INVOICE #335 V-CAP SHIRTS

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
05 / 20 / 2009

Transaction ID : SB21B.107142

Amount of Each Disbursement this Period

12818.81

Full Name (Last, First, Middle Initial)

C. CUSTOM PROMOTIONS, INC.

Mailing Address 17520 W. TWELVE MILE RD.
#210

City SOUTHFIELD State MI Zip Code 48076

Purpose of Disbursement
R1C INVOICE #363-B 390SWTSHIRT

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 04 / 2009

Transaction ID : SB21B.107386

Amount of Each Disbursement this Period

6157.48

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

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

19051.83

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

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

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

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

A. ALAIN DOMINIQUE

Category/
Type

3000.00

State: District:

B. ALAIN DOMINIQUE

MM / DD / YYYY

Category/
Type

-840.00

State: District:

C. DOUGLAS CASADY

Category/
Type

500.00

State: District:

2660.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 93 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. EFFINGER PRINTING COMPANY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 12703 PENNRIDGE DRIVE

City	State	Zip Code
BRIDGETON	MO	63044

Transaction ID : SB21B.106979Purpose of Disbursement
R5 VCAP PROMOTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

14194.93

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. ENTERPRISE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2009

Mailing Address 1281 N. WARSON ROAD

City	State	Zip Code
ST. LOUIS	MO	63132

Transaction ID : SB21B.106984Purpose of Disbursement
R5 BONDS-VCAP CRUISE DRIVE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1425.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. ENTERPRISE BANK

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		25		2009

Mailing Address 1281 N. WARSON ROAD

City	State	Zip Code
ST. LOUIS	MO	63132

Transaction ID : SB21B.106985Purpose of Disbursement
R5 BONDS-VCAP CRUISE DRIVE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

275.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

15894.93

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

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.106979

This refers to the cost of V-CAP incentive offered to encourage Region 5 UAW members and their families to donate to V-CAP.

Form/Schedule:
Transaction ID:

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

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

A. ENTERPRISE BANK

Category/
Type

150.00

State: District:

B. KATIE FAGAN

Category/
Type

320.00

State: District:

C. THEODORE FAGAN

Category/
Type

280.00

State: District:

750.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106348**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106346**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

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

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

The three 3x3 grids are as follows:

M		M

06

D		D

04

Y		Y		Y		Y

2009Category/
Type

2500.00

Category/
Type

-700.00

02 / 17 / 2009

Category/
Type

358.81

2158.81

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. GENERAL MOTIVATION COMPANY

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	1				2	7		2	0	0	9		

Mailing Address 3085 WALKENT DR. NW

Transaction ID : SB21B.106357

City	State	Zip Code
GRAND RAPIDS	MI	49544-1440

Amount of Each Disbursement this Period

Purpose of Disbursement
R1C INV# 50756-V-CAP AWARDS

Category/ Type

456.18

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

State: District:

Full Name (Last, First, Middle Initial)

B. GREAT SOUTHERN TRAVEL

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2				1	8		2	0	0	9		

Mailing Address 6201 MID RIVERS MALL DRIVE

Transaction ID : SB21B.106556

City	State	Zip Code
ST. CHARLES	MD	63304

Amount of Each Disbursement this Period

Purpose of Disbursement
R5 VCAP CRUISE YOLANDA TURNER

Category/ Type

3756.34

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

State: District:

Full Name (Last, First, Middle Initial)

C. HILLSTAR PROMOTIONS INC.

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	4				2	9		2	0	0	9		

Mailing Address 4400 MANOR LANE

Transaction ID : SB21B.107132

City	State	Zip Code
HAMBURG	NY	14075

Amount of Each Disbursement this Period

Purpose of Disbursement
R9 VCAP DIAMOND CLUB

Category/ Type

43062.39

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
----------------	---

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
-------------------	---

State: District:

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

47274.91

: 97 `A=G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @ `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107132

This refers to the cost of V-CAP incentive offered to encourage Region 9 UAW members and their families to donate to V-CAP.

Form/Schedule:
Transaction ID:

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

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

A. HOBIE'S RESTAURANT

Category/
Type

216.70

State: District:

B. IMAGE GROUP

Category/
Type

6391.86

State: District:

C. IMAGE GROUP

The image shows three 3x3 grids, each representing a number using the letters M, D, and Y. The first grid shows the number 03, the second shows 10, and the third shows 2009. The letters are placed in the top row of each grid, and the number is placed in the bottom row. The grids are separated by slashes.

Category/
Type

23215.81

State: District:

29824.37

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 101 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. IMPRESSIONS SPECIALITY ADVERTISING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 8914 S. TELEGRAPH ROAD

Transaction ID : SB21B.106977

City	State	Zip Code
TAYLOR	MI	48180

Amount of Each Disbursement this Period

Purpose of Disbursement
REG 1D INV#89094-VCAP WATCHESCategory/
Type

2300.52

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. IMPRESSIONS SPECIALITY ADVERTISING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address 8914 S. TELEGRAPH ROAD

Transaction ID : SB21B.107127

Amount of Each Disbursement this Period

City	State	Zip Code
TAYLOR	MI	48180

Purpose of Disbursement
R1D VCAP CLOCKSCategory/
Type

1182.24

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. IMPRESSIONS SPECIALITY ADVERTISING

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2009

Mailing Address 8914 S. TELEGRAPH ROAD

Transaction ID : SB21B.107401

Amount of Each Disbursement this Period

City	State	Zip Code
TAYLOR	MI	48180

Purpose of Disbursement
R1A INV#89543-WOOL/LTHR JACKETCategory/
Type

227.75

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

3710.51

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

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

A. MARIA JAWORSKI

Mailing Address 5963 HUBBELL

City	State	Zip Code
DEARBORN HEIGHTS	MI	48127

Purpose of Disbursement
BILLING:FOOD/REFRESHMENTS

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement



Transaction ID : SB21B.106546

Amount of Each Disbursement this Period

993.50

Full Name (Last, First, Middle Initial)
B. JEFFERY ZARISKE

Mailing Address 5613 FORT RD

City	State	Zip Code
SAGINAW	MI	48601

Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB21B.106534

Amount of Each Disbursement this Period

Age Group	Number of people
13-17	100
18-24	150
25-34	200
35-44	250
45-54	300
55-64	350
65-74	400
75-84	450
85+	500

Full Name (Last, First, Middle Initial)
C. JEFFREY DOWNING

Mailing Address 3801 TAFT AVE SW

City	State	Zip Code
GRAND RAPIDS	MI	49509

Purpose of Disbursement	VCAP PRIZE
-------------------------	------------

Candidate Name

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President
State:	District:	

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

Date of Disbursement

Transaction ID : SB21B.106399

Amount of Each Disbursement this Period

500.00

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

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

1993.50

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JEFFREY DOWNING

Mailing Address 3801 TAFT AVE SW

City
GRAND RAPIDSState
MIZip Code
49509Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02		03		2009

Transaction ID : SB21B.106400

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. JENNIE CULBERSON

Mailing Address 2822 HAMPSHIRE ST

City
SAGINAWState
MIZip Code
48601Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02		03		2009

Transaction ID : SB21B.106392

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. BOBBY JONES

Mailing Address 3686 TALLMAN AVE SE

City
GRAND RAPIDSState
MIZip Code
49508Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02		03		2009

Transaction ID : SB21B.106433

Amount of Each Disbursement this Period

250.00

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

1000.00

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

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

Category/
Type

52.87

Category/
Type

33.75

Category/
Type

21.00

107.62

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106356**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106358**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106550**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule:

Transaction ID:

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

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

Category/
Type

36.25

MM / DD / YYYY

Category	Percentage
Do not use a mobile phone	65.00%

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

The image shows three 3x3 grids representing the numbers 03, 04, and 2009. Each grid has a top row of three squares, a middle row of three squares, and a bottom row of three squares. The number 03 is represented by black squares in the top row (positions 1 and 3), the middle row (position 1), and the bottom row (position 1). The number 04 is represented by black squares in the top row (positions 1 and 3), the middle row (position 1), and the bottom row (positions 1 and 2). The number 2009 is represented by black squares in the top row (positions 1, 3, and 5), the middle row (positions 1, 3, and 5), and the bottom row (positions 1, 3, and 5).

34.50

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Age Group	Percentage
18-24	135.75
25-34	~100
35-44	~100
45-54	~100
55-64	~100
65-74	~100
75-84	~100
85+	~100

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106551**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106555**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B
Transaction ID : SB21B.106957

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule:
Transaction ID:

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106960**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106973**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.107117

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule:

Transaction ID:

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

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

A. MICHAEL JOSEPH

Category/
Type

164.75

State: District:

B. MICHAEL JOSEPH

04 / 29 / 2009

Category/
Type

123.47

State: District:

C. MICHAEL JOSEPH

Category/
Type

Age Group	Percentage
18-24	58.00
25-34	52.00
35-44	48.00
45-54	42.00
55-64	38.00
65-74	32.00
75-84	28.00
85+	12.00

State: District:

348.22

: 97 'A-G79 @G B9CI G'H9LH'F9 @G H98 'HC'5 'F9DCFH'ZG7 <98I @G 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107135**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107136**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107137

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule:
Transaction ID:

**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 116 OF 235

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code
OAK PARK MI 48237Purpose of Disbursement
LEASED EMPLOYEE COSTS

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
06		23		2009

Transaction ID : SB21B.107396

Amount of Each Disbursement this Period

274.75

Full Name (Last, First, Middle Initial)

B. MICHAEL JOSEPH

Mailing Address 22150 STRATFORD

City State Zip Code
OAK PARK MI 48237Purpose of Disbursement
LEASED EMPLOYEE COSTS

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
06		23		2009

Transaction ID : SB21B.107399

Amount of Each Disbursement this Period

180.00

Full Name (Last, First, Middle Initial)

C. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City State Zip Code
DETROIT MI 48226Purpose of Disbursement
FED TX WD/A.NELSON/945 1ST QTR

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
01		08		2009

Transaction ID : SB21B.106335

Amount of Each Disbursement this Period

1400.00

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

1854.75

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: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5H-CB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107396**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107399**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

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

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

2800.00

Category/
Type

MM / DD / YYYY

8558.00

Category/
Type

840.00

Category/
Type

12198.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JPMORGAN CHASE

Mailing Address 611 WOODWARD

City
DETROITState
MIZip Code
48226Purpose of Disbursement
FED TAX WD/KFRENCH/945 2ND QTR

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
06	/	04	/	2009

Transaction ID : SB21B.107382

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

B. KAREN FRENS-KENNEDY

Mailing Address 155 LOCH LOMONDAVE NE

City
GRAND RAPIDSState
MIZip Code
49546Purpose of Disbursement
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
02	/	03	/	2009

Transaction ID : SB21B.106415

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. LEIGH KEGERREIS

Mailing Address 13704 LAPLAISANCE RD.

City
MONROEState
MIZip Code
48161Purpose of Disbursement
LEASED EMPLOYEE COSTS

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
06	/	15	/	2009

Transaction ID : SB21B.107390

Amount of Each Disbursement this Period

60.00

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

1260.00

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: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107390

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees and payments to the leased employees directly for reimbursement for out of pocket costs.

Form/Schedule:
Transaction ID:

**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 121 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LAHOMA BUCKLEY

Mailing Address 670 W LINWOOD RD

City
LINWOODState
MIZip Code
48634Purpose of Disbursement
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
02		03		2009

Transaction ID : SB21B.106382

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. LAJOYCE REAVES

Mailing Address 2188 CHASE POINT COURT

City
FLUSHINGState
MIZip Code
48433Purpose of Disbursement
REG 1C 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
03		26		2009

Transaction ID : SB21B.107077

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. MACK CROUNSE GROUPMailing Address 2001 N. BEAUREGARD ST.
SUITE 420City
ALEXANDRIAState
VAZip Code
22311Purpose of Disbursement
INV#UAW08007 POSTCARD MAILER

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
05		28		2009

Transaction ID : SB21B.107144

Amount of Each Disbursement this Period

11027.31

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

12027.31

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: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107144

This expenditure is for membership communication within the restricted class, not expressed advocacy.

Form/Schedule:
Transaction ID:

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

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

A. TOM MAKI

Category/
Type

250.00

State: District:

B. MELVIN OWENS

Candidate Name

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. MICHAEL LATTY

Three 7-segment displays are shown, each with its segment pattern indicated by letters above the digits:

- Display 1: Shows '02'. Segments M (top-left) and M (top-right) are lit.
- Display 2: Shows '03'. Segments D (top-left) and D (top-right) are lit.
- Display 3: Shows '2009'. Segments Y (top-left), Y (top-right), Y (middle-left), Y (middle-right), and Y (bottom-right) are lit.

Candidate Name

Category/
Type

500.00

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

1250.00

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

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

A. MORRIS MCKINNEY

Category/
Type

250.00

State: District:

B. DIANA MOYER

Category/
Type

500.00

State: District:

C. MYRTLE ISLER

Category/
Type

500.00

State: District:

1250.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. ANTHONY NELSON

Mailing Address 8642 EAST 400 NORTH

City
GREENTOWNState
INZip Code
46936Purpose of Disbursement
FEDERAL TAXES WITHHELD

Candidate Name

Office 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
01 08 2009
Transaction ID : SB21B.106332

Amount of Each Disbursement this Period

-1400.00

Full Name (Last, First, Middle Initial)

B. ANTHONY NELSON

Mailing Address 8642 EAST 400 NORTH

City
GREENTOWNState
INZip Code
46936Purpose of Disbursement
REGION 3 V-CAP DRAWING

Candidate Name

Office 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
01 08 2009
Transaction ID : SB21B.106334

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RALPH JACOBS

Mailing Address 5650 S IVA RD

City
ST CHARLESState
MIZip Code
48655Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02 03 2009
Transaction ID : SB21B.106425

Amount of Each Disbursement this Period

250.00

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

3850.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 126 OF 235

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. RAYMOND OLSZOWY

Mailing Address 1003 4TH ST

City
BAY CITYState
MIZip Code
48708Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02 03 2009
Transaction ID : SB21B.106480

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. RAYMOND VINCENT

Mailing Address 8615 E WILDERNESS

City
WHITE CLOUDState
MIZip Code
49349Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02 03 2009
Transaction ID : SB21B.106521

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. RUTH JONES

Mailing Address 315 LOWELL ST. APT 318

City
DOWAGIACState
MIZip Code
49047Purpose of Disbursement
FEDERAL TAXES WITHHELD

Candidate Name

Office 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
02 03 2009
Transaction ID : SB21B.106435

Amount of Each Disbursement this Period

-2800.00

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

-2050.00

**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 127 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RUTH JONES

Mailing Address 315 LOWELL ST. APT 318

City	State	Zip Code
DOWAGIAC	MI	49047

Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2009

Transaction ID : SB21B.106436

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. LYNNE SCHWARTZ

Mailing Address 468 VILLAHE OAKS COURT

City	State	Zip Code
ANN ARBOR	MI	48103

Purpose of Disbursement
08 DEM NTL CONV LABOR MTG

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2009

Transaction ID : SB21B.106329

Amount of Each Disbursement this Period

1543.94

Full Name (Last, First, Middle Initial)

C. SWIFT PRINTING COMPANY

Mailing Address 404 BRIDGE STREET NW

City	State	Zip Code
GRAND RAPIDS	MI	49504

Purpose of Disbursement
R1D INV#35975-V-CAP

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For:	<input type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2009

Transaction ID : SB21B.106326

Amount of Each Disbursement this Period

291.50

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

11835.44

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: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.106326

This refers to the cost of V-CAP incentive offered to encourage Region 1D UAW members and their families to donate to V-CAP.

Form/Schedule:
Transaction ID:

**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 129 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SWIFT PRINTING COMPANY

Mailing Address 404 BRIDGE STREET NW

City
GRAND RAPIDSState
MIZip Code
49504Purpose of Disbursement
R1D-INV#36612 DIR CLUB BOOKLET

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
04		15		2009

Transaction ID : SB21B.107125

Amount of Each Disbursement this Period

2800.31

Full Name (Last, First, Middle Initial)

B. THE MCLAUGHLIN COMPANY

Mailing Address 1725 DESALES ST. NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
INV#150532 HIRED/NONOWN AUTO L

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
02		04		2009

Transaction ID : SB21B.106535

Amount of Each Disbursement this Period

4963.00

Full Name (Last, First, Middle Initial)

C. THE MCLAUGHLIN COMPANY

Mailing Address 1725 DESALES ST. NW

City
WASHINGTONState
DCZip Code
20036Purpose of Disbursement
INV#150530/150531 COMM POLICY

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
02		04		2009

Transaction ID : SB21B.106536

Amount of Each Disbursement this Period

107292.00

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

115055.31

--

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFHŽG7 <98I @`CF`+H9A-N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.106535

This refers to pro-rated auto insurance coverage paid on behalf of staff working on membership communication.

Form/Schedule: SB21B
Transaction ID: SB21B.106536

This reflects payment for renewal of bond/liability insurance protecting CAP Council funds.

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

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

A. TIMOTHY MARSHALL

Date of Disbursement

Transaction ID : SB21B.107059

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 1086

Date of Disbursement

Transaction ID : SB21B.107120

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

2725.24

Full Name (Last, First, Middle Initial)

C. UAW LOCAL 1590

Date of Disbursement

Diagram illustrating the segment patterns for the numbers 02, 04, and 2009:

- 02: Segments M (top-left), M (top-right), and 02 (bottom).
- 04: Segments D (top-left), D (top-right), and 04 (bottom).
- 2009: Segments Y (top-left), Y (top-right), Y (middle-left), Y (middle-right), and 2009 (bottom).

Transaction ID : SB21B.106540

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

Amount of Each Disbursement this Period

6252.84

9478.08

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107120**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106540**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

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

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



2505.09

1637.53

3477.53

7620.15

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107146**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106538**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.107400

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

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

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

A. UAW LOCAL 524

Category/
Type

4532.49

State: District:

B. UAW LOCAL 600

Category/
Type

16010.20

State: District:

C. UAW LOCAL 600

Category/
Type

18207.92

State: District:

38750.61

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106543**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107118**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107403**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106359**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107392**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 `A-G79 @G B9CI G`H9LH`F9 @H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SB21B
Transaction ID : SB21B.106342

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:
Transaction ID:

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

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

A. UAW LOCAL 723

Category/
Type

2293.82

State: District:

B. UAW LOCAL 723

MM / DD / YYYY

Category/
Type

1408.17

State: District:

C. UAW LOCAL 723

Category/
Type

1336.59

State: District:

5038.58

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106354**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106552**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106553**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.106554**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.106974**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
 .

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107119**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

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

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

A. UAW LOCAL 723

Category/
Type

1369.56

State: District:

B. UAW LOCAL 723

Category/
Type

1146.91

State: District:

C. UAW LOCAL 723

The image shows three 3x3 grids representing the numbers 04, 08, and 2009. Each grid has a top row of three squares, a middle row of three squares, and a bottom row of three squares. The number 04 is represented by black squares in the top row (positions 1 and 3), the middle row (position 1), and the bottom row (position 1). The number 08 is represented by black squares in the top row (positions 1 and 3), the middle row (position 1), and the bottom row (position 1). The number 2009 is represented by black squares in the top row (positions 1, 2, 3, and 4), the middle row (position 1), and the bottom row (position 1).

Category/
Type

1146.91

State: District:

3663.38

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107121**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107122**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.107123

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

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

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

Category/
Type

1146.91

Category/
Type

1352.18

The three 3x3 grids are as follows:

M		M

06

D		D

04

Y		Y		Y		Y		Y

2009Category/
Type

10755.69

13254.78

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'G7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107134**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107384**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB21B

Transaction ID : SB21B.107385

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule:

Transaction ID:

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 154 OF 235

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 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. UAW LOCAL 723

Mailing Address 281 DETROIT

City
MONROEState
MIZip Code
48161Purpose of Disbursement
LEASED RESTRICTED CLASS EMP

Candidate Name

Office 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
06 / 15 / 2009
Transaction ID : SB21B.107389

Amount of Each Disbursement this Period

1278.12

Full Name (Last, First, Middle Initial)

B. UAW LOCAL 723

Mailing Address 281 DETROIT

City
MONROEState
MIZip Code
48161Purpose of Disbursement
LEASED RESTRICTED CLASS EMP

Candidate Name

Office 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
06 / 23 / 2009
Transaction ID : SB21B.107402

Amount of Each Disbursement this Period

1146.91

Full Name (Last, First, Middle Initial)

C. VIVIAN PELLOW

Mailing Address 3021 WEISS ST

City
SAGINAWState
MIZip Code
48602Purpose of Disbursement
VCAP PRIZE

Candidate Name

Office 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
02 / 03 / 2009
Transaction ID : SB21B.106482

Amount of Each Disbursement this Period

400.00

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

2825.03

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFH'ZG7 <98I @ 'CF' +H9A-N5HCB

Form/Schedule: **SB21B**

Transaction ID : **SB21B.107389**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

Form/Schedule: **SB21B**

Transaction ID: **SB21B.107402**

Your letter articulates concern about V-CAP's disclosure of reimbursement for 'Leased Employee Costs, Leased Restricted Class, Leased Restricted Class Emp, Lost Time and Exp-GA Senate Elec, PMT Leased Restricted Class Em, and Reimb Leased Rest. Class Emp.' Specifically, you express concern that these disclosures reflect 'apparent administrative expenses' constituting in-kind contribution made on behalf of UAW V-CAP. However, this inaccurately describes the disbursements. These expenditures are for the costs of leased employees. V-CAP leases employees for membership communication and related activities from the Local Unions. These descriptions reflect payment from V-CAP to the relevant Local Unions for the leased employees.

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

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

A. WILLIAM BAKER

Date of Disbursement

Transaction ID : SB21B.106364

Amount of Each Disbursement this Period

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Full Name (Last, First, Middle Initial)

B. WILSON TROPHY COMPANY

Date of Disbursement

04 / 15 / 2009

City	State	Zip Code
SACRAMENTO	CA	95815

Transaction ID : SB21B.107126

Purpose of Disbursement
R1D INV#A07-1725 DIR/VIC PINS

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C.

Date of Disbursement

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement	
1	2
3	4
5	6
7	8
9	10
11	12
13	14
15	16
17	18
19	20
21	22
23	24
25	26
27	28
29	30
31	32
33	34
35	36
37	38
39	40
41	42
43	44
45	46
47	48
49	50
51	52
53	54
55	56
57	58
59	60
61	62
63	64
65	66
67	68
69	70
71	72
73	74
75	76
77	78
79	80
81	82
83	84
85	86
87	88
89	90
91	92
93	94
95	96
97	98
99	100

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

Office Sought:	<input type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

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

1555.01

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

496037.40

: 97 `A=G79 @G B9CI G`H9LH`F9 @G H98 `HC`5 `F9DCFHŽG7 <98I @G `CF`+H9A=N5HCB
.

Form/Schedule: SB21B
Transaction ID : SB21B.107126

This refers to the cost of V-CAP incentive offered to encourage Region 1D UAW members and their families to donate to V-CAP.

Form/Schedule:
Transaction ID:

**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 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CENTRAL NY UAW PAC COUNCIL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	28	/	2009

Mailing Address 35 GEORGE KARL BOULEVARD

City	State	Zip Code
AMHERST	NY	14221

Transaction ID : SB22.107152Purpose of Disbursement
TRANSFER TO AFFILIATED COMMITTEE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

13105.30

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. OHIO STATE UAW PAC COUNCIL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2009

Mailing Address 133 E. LIVINGSTON ROAD

City	State	Zip Code
COLUMBUS	OH	43215

Transaction ID : SB22.107150Purpose of Disbursement
TRANSFER TO AFFILIATED COMMITTEE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

250000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. UAW MICHIGAN V-PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	27	/	2009

Mailing Address 8000 E. JEFFERSON

City	State	Zip Code
DETROIT	MI	48214

Transaction ID : SB22.107149Purpose of Disbursement
TRANSFER TO AFFILIATED COMMITTEE

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

250000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

513105.30

	21b	X	22		23		24		25		26
	27		28a		28b		28c		29		30b

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

A. WESTERN NEW YORK CAP COUNCIL

Date of Disbursement

Transaction ID : SB22.107153

Category/
Type

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

6351.11

B. WESTERN NEW YORK PAC

Date of Disbursement

Transaction ID : SB22.107154

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

Amount of Each Disbursement this Period

12496.07

C.

Date of Disbursement

City	State	Zip Code
------	-------	----------

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

Amount of Each Disbursement this Period

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

18847.18

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

531952.48

**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 160 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ADAM SMITH FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2009

Mailing Address PO BOX 23626

City	State	Zip Code
FEDERAL WAY	WA	98093

Transaction ID : SB23.107281Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

ADAM ANDREW SMITHCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 02

Full Name (Last, First, Middle Initial)

B. ALAN GRAYSON FOR U.S. CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2009

Mailing Address 2206 E. COLONIAL DRIVE

City	State	Zip Code
ORLANDO	FL	32803

Transaction ID : SB23.107175Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

ALAN MARK GRAYSONCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District: 08

Full Name (Last, First, Middle Initial)

C. ALAN MOLLOHAN FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2009

Mailing Address PO BOX 1343

City	State	Zip Code
FAIRMONT	WV	26555-1343

Transaction ID : SB23.107287Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

ALAN B. MOLLOHANCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WV District: 01

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

3000.00

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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)

PAGE 161 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ALASKANS FOR BEGICH

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 240287

City	State	Zip Code
ANCHORAGE	AK	99524

Transaction ID : SB23.107155Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

MARK BEGICHCategory/
Type

1000.00

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: AK District: 00

Full Name (Last, First, Middle Initial)

B. ALEXANDER GREEN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 3003 SOUTH LOOP WEST
SUITE 321

City	State	Zip Code
HOUSTON	TX	77054

Transaction ID : SB23.106621Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

ALEXANDER GREENCategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 09

Full Name (Last, First, Middle Initial)

C. A LOT OF PEOPLE FOR DAVE OBEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address P.O. BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Transaction ID : SB23.106624Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DAVID R OBEYCategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 07

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

3000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

5000.00

Category/
Type

1000.00

Category/
Type

2500.00

Category/
Type

8500.00

**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 163 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ANDRE' CARSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address ONE N. CAPITOL AVE. #200

City	State	Zip Code
INDIANAPOLIS	IN	46204

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ANDRE CARSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 07

Category/
Type**Transaction ID : SB23.107199**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. ANDREWS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address 523 RICHEY AVENUE

City	State	Zip Code
COLLINGSWOOD	NJ	08108

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROBERT E ANDREWSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 01

Category/
Type**Transaction ID : SB23.107239**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ARCURI FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Mailing Address PO BOX 8508

City	State	Zip Code
UTICA	NY	13505

Purpose of Disbursement
CONTRIBUTION

Candidate Name

MICHAEL A ARCURIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 24

Category/
Type**Transaction ID : SB23.107251**

Amount of Each Disbursement this Period

5000.00

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

11000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BARBARA LEE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 1127 11TH STREET, 225

City	State	Zip Code
SACRAMENTO	CA	95814

Transaction ID : SB23.106570Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

BARBARA LEECategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 09

Full Name (Last, First, Middle Initial)

B. BARNEY FRANK FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2009

Mailing Address PO BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Transaction ID : SB23.107204Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

BARNEY FRANKCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 04

Full Name (Last, First, Middle Initial)

C. BECERRA FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2009

Mailing Address PO BOX 261060

City	State	Zip Code
LOS ANGELES	CA	90026

Transaction ID : SB23.106559Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

XAVIER BECERRACategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 31

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

4500.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

A. BECERRA FOR CONGRESS

XAVIER BECERRA

State: CA District: 31

2500.00

B. BEN CARDIN FOR SENATE

05 / 01 / 2009

BENJAMIN L CARDIN

Disbursement For: 2012

☒ Primary ☐ General

☐ Other (specify) ▼

State: MD District: 03

1000.00

C. BENNET FOR COLORADO

MICHAEL F BENNET

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

State: CO District: 00

Transaction ID : SB23.107161

Amount of Each Disbursement this Period

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

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

4500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BERMAN FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 8665 WILSHIRE BOULEVARD
#220

City BEVERLY HILLS State CA Zip Code 90211

Purpose of Disbursement
CONTRIBUTION

Candidate Name

HOWARD L BERMANOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 28

Category/
Type**Transaction ID : SB23.106562**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. BERRY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 227 MASSACHUSETTS AVE.,
N.E., SUITE 101

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

MARION BERRYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 01

Category/
Type**Transaction ID : SB23.106558**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. BETTY MCCOLLUM FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 14131

City ST PAUL State MN Zip Code 55114-0131

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BETTY MCCOLLUMOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 04

Category/
Type**Transaction ID : SB23.107224**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BOUCHER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 2000

City	State	Zip Code
ABINGDON	VA	24212

Transaction ID : SB23.107275Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

FREDERICK C BOUCHERCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: VA District: 09

Full Name (Last, First, Middle Initial)

B. BRAD MILLER FOR CONGRESS CAMPAIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 3803 B COMPUTER DRIVE
SUITE 110

City	State	Zip Code
RALEIGH	NC	27609

Transaction ID : SB23.107231Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

RALPH BRADLEY MILLERCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 13

Full Name (Last, First, Middle Initial)

C. BRAD MILLER FOR CONGRESS CAMPAIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address 3803 B COMPUTER DRIVE
SUITE 110

City	State	Zip Code
RALEIGH	NC	27609

Transaction ID : SB23.107234Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

RALPH BRADLEY MILLERCategory/
Type

1500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 13

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

3500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. BRIAN BAIRD FOR CONGRESS CAMPAIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address 442 NEW JERSEY AVENUE S.E.

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB23.107283Purpose of Disbursement
BRIAN BAIRD

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WA District: 03

Full Name (Last, First, Middle Initial)

B. BRIDGE PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 1021

City	State	Zip Code
MENOMINEE	MI	49858

Transaction ID : SB23.107217Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

2500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. BRUCE BRALEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address 3151 BROCKWAY RD.

City	State	Zip Code
WATERLOO	IA	50701

Transaction ID : SB23.107185Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IA District: 01

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

4500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CARNEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2009

Mailing Address PO BOX A

City	State	Zip Code
CLARKS SUMMIT	PA	18411

Transaction ID : SB23.106616Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

CHRISTOPHER CARNEYCategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 10

Full Name (Last, First, Middle Initial)

B. CHARLES A. GONZALEZ CONGRESSIONAL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2009

Mailing Address P O BOX 12612
1215 BROADWAY

City	State	Zip Code
SAN ANTONIO	TX	78212

Transaction ID : SB23.106622Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

CHARLES A GONZALEZCategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 20

Full Name (Last, First, Middle Initial)

C. CHARLIE MELANCON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2009

Mailing Address PO BOX 549

City	State	Zip Code
NAPOLEONVILLE	LA	70390

Transaction ID : SB23.106594Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

CHARLES MELANCONCategory/
Type

1500.00

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: LA District: 00

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

3500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CHET EDWARDS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address P.O. BOX 70426

City	State	Zip Code
WASHINGTON	DC	20024

Transaction ID : SB23.106618Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

CHET EDWARDSCategory/
Type

1500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 17

Full Name (Last, First, Middle Initial)

B. CITIZENS FOR ALTMIRE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2009

Mailing Address PO BOX 1776

City	State	Zip Code
FREEDOM	PA	15042

Transaction ID : SB23.107425Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JASON ALTMIRECategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 04

Full Name (Last, First, Middle Initial)

C. CITIZENS FOR JOHN OLVER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2009

Mailing Address P.O. Box 819

City	State	Zip Code
Amherst	MA	01004

Transaction ID : SB23.107205Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOHN WALTER OLVERCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 01

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

3500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CLEAVER FOR CONGRESS

Mailing Address PO BOX 411872

City	State	Zip Code
KANSAS CITY	MO	64141

Purpose of Disbursement
CONTRIBUTION

Candidate Name

EMANUEL CLEAVER IIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106606

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COHEN FOR CONGRESS

Mailing Address 349 KENILWORTH

City	State	Zip Code
MEMPHIS	TN	38112

Purpose of Disbursement
CONTRIBUTION

Candidate Name

STEVE I MR. COHENOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: TN District: 09

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Transaction ID : SB23.107274

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT LINDA SANCHEZ

Mailing Address P.O. BOX 1865

City	State	Zip Code
HAWAIIAN GARDENS	CA	90716

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LINDA SANCHEZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 39

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Transaction ID : SB23.106569

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO RE-ELECT CAROLYN CHEEKS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Mailing Address P.O. BOX 32175

City	State	Zip Code
DETROIT	MI	48232

Transaction ID : SB23.107219Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

CAROLYN MS. KILPATRICKCategory/
Type

2500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 13

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO RE-ELECT LORETTA SANCHEZ

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 6037

City	State	Zip Code
SANTA ANA	CA	92706

Transaction ID : SB23.106571Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

LORETTA SANCHEZCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 47

Full Name (Last, First, Middle Initial)

C. CONGRESSIONAL HISPANIC CAUCUS/BOLD PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2009

Mailing Address 1831 BAY STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB23.107407Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

8500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CONGRESSMAN WAXMAN CAMPAIGN COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 8665 WILSHIRE BLVD, SUITE 220

City	State	Zip Code
BEVERLY HILLS	CA	90211

Transaction ID : SB23.106574Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

HENRY A. WAXMANCategory/
Type

2500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 30

Full Name (Last, First, Middle Initial)

B. CONNECTICUT DEMOCRATIC STATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2009

Mailing Address 179 ALLYN STREET
SUITE 301

City	State	Zip Code
HARTFORD	CT	06103

Transaction ID : SB23.107168Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. CONSUMER FEDERATION OF AMERICA

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address 1424 16TH STREET, NW
SUITE 604

City	State	Zip Code
WASHINGTON	DC	20036

Transaction ID : SB23.107174Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

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

8500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. COSTELLO FOR CONGRESS COMMITTEE

Mailing Address P.O. BOX 8250

City	State	Zip Code
BELLEVILLE	IL	62222

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JERRY F COSTELLOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2009

Transaction ID : SB23.107186

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. COURTNEY FOR CONGRESS

Mailing Address PO BOX 1372

City	State	Zip Code
VERNON	CT	06066

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOSEPH D COURTNEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	04	/	2009

Transaction ID : SB23.107162

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

C. CUMMINGS FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ELIJAH E CUMMINGSOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	23	/	2009

Transaction ID : SB23.107206

Amount of Each Disbursement this Period

1000.00

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

4000.00

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

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

A. DAVID WU FOR CONGRESS

03 / 04 / 2009

City	State	Zip Code
PORTLAND	OR	97204

Transaction ID : SB23.107262

Amount of Each Disbursement this Period

Category/
Type

DAVID WU

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

B. DAVIS FOR CONGRESS

MM / DD / YYYY

City	State	Zip Code
WASHINGTON	DC	20013

Transaction ID : SB23.106587

Purpose of Disbursement

CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

DANNY K DAVIS

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

C. DEBBIE HALVORSON FOR CONGRESS

City	State	Zip Code
CRETE	IL	60417

Transaction ID : SB23.107191

Purpose of Disbursement

CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

DEBORAH 'DEBBIE' HALVORSON

Office Sought:	<input checked="" type="checkbox"/>	House
	<input type="checkbox"/>	Senate
	<input type="checkbox"/>	President

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

2500.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DEBBIE WASSERMAN SCHULTZ FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		28		2009

Mailing Address 1725 MAIN STREET
SUITE 215

City WESTON State FL Zip Code 33326

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DEBBIE WASSERMAN SCHULTZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 20

Transaction ID : SB23.107180

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. DEFAZIO FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 1316

City SPRINGFIELD State OR Zip Code 97477

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PETER A DEFAZIOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OR District: 04

Transaction ID : SB23.107263

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. DEMOCRATIC CONGRESSIONAL CAMPAIGN CTE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Mailing Address 430 S CAPITOL ST, SE

City WASHINGTON State DC Zip Code 20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB23.106584

Amount of Each Disbursement this Period

15000.00

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

17500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 179 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DEMOCRATIC PARTY OF WISCONSIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address 222 STATE STREET, SUITE 400

City	State	Zip Code
MADISON	WI	53703

Transaction ID : SB23.107286Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. DEMOCRATIC SENATORIAL CAMPAIGN COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 430 SOUTH CAPITOL STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB23.107649Purpose of Disbursement
2009 MEMBERSHIP DUES

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

15000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

C. DEMOCRATS WIN SEATS PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		01		2009

Mailing Address 1071 TWIN BRANCH LANE

City	State	Zip Code
WESTON	FL	33326

Transaction ID : SB23.107178Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

1000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

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

21000.00

: 97 'A-G79 @G B9CI G'H9LH'F9 @H98 'HC'5 'F9DCFHŽG7 <98I @ 'CF' +H9A-N5HCB
.

Form/Schedule: SB23

Transaction ID : SB23.107649

This refers to membership dues paid to the Democratic Senatorial Campaign Committee, which is a committee of a national political party subject to the \$15,000 limit per calendar year. On the original FEC Form 3x filed 7/15/09, the disbursement was reported on Schedule B, Line 21(b). The report was subsequently amended on 12/11/09 and this item was moved to Schedule B, Line 23. In the process of moving the item, the payee name was incorrectly typed as 'Democratic Congressional Campaign CTE' but the correct payee is 'Democratic Senatorial Campaign Committee'. The report has been amended to reflect the correct payee.

Form/Schedule:

Transaction ID:

**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 181 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DIANA DEGETTE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	18	/	2009

Mailing Address PO BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Transaction ID : SB23.106577Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DIANA L DEGETTECategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 01

Full Name (Last, First, Middle Initial)

B. DOGETT FOR US CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2009

Mailing Address 138 D STREET, SE

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB23.106619Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

LLOYD A MR. DOGETTCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: TX District: 25

Full Name (Last, First, Middle Initial)

C. DONNA EDWARDS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	21	/	2009

Mailing Address P.O. BOX 441153

City	State	Zip Code
FORT WASHINGTON	MD	20749

Transaction ID : SB23.106596Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DONNA EDWARDSCategory/
Type

3000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2008
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 04

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

6500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 182 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DONNA EDWARDS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address P.O. BOX 441153

City	State	Zip Code
FORT WASHINGTON	MD	20749

Transaction ID : SB23.106598Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DONNA EDWARDSCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 04

Full Name (Last, First, Middle Initial)

B. DONNELLY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 1961

City	State	Zip Code
SOUTH BEND	IN	46634

Transaction ID : SB23.106591Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOSEPH SIMON MR. DONNELLYCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 02

Full Name (Last, First, Middle Initial)

C. DONNELLY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 1961

City	State	Zip Code
SOUTH BEND	IN	46634

Transaction ID : SB23.107198Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOSEPH SIMON MR. DONNELLYCategory/
Type

4000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IN District: 02

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

6000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. DOYLE FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 17426

City	State	Zip Code
PITTSBURGH	PA	15235

Transaction ID : SB23.106614Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

MIKE DOYLECategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District: 14

Full Name (Last, First, Middle Initial)

B. DUTCH RUPPERSBERGER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Mailing Address P.O. BOX 5675

City	State	Zip Code
TIMONIUM	MD	21094

Transaction ID : SB23.107209Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DUTCH RUPPERSBERGERCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 02

Full Name (Last, First, Middle Initial)

C. EARL BLUMENAUER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address P.O. BOX 1396

City	State	Zip Code
PORTLAND	OR	97207

Transaction ID : SB23.107264Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

EARL BLUMENAUERCategory/
Type

2000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OR District: 03

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

4000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. EARL POMEROY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2009

Mailing Address PO BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Purpose of Disbursement
CONTRIBUTION

Candidate Name

EARL RALPH POMEROYCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: ND District: 00

Transaction ID : SB23.107419

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. ENGEL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Mailing Address 115 D ST, SE #102

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ELIOT ENGELCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 17

Transaction ID : SB23.106613

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FATTAH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 1800 JFK BLVD., SUITE 502

City	State	Zip Code
PHILADELPHIA	PA	19103

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CHAKA FATTAHCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 02

Transaction ID : SB23.107269

Amount of Each Disbursement this Period

1000.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 185 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FISHER FOR OHIO

Mailing Address P.O. BOX 1418

City	State	Zip Code
COLUMBUS	OH	43216

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LEE IRWIN FISHEROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: OH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2009

Transaction ID : SB23.107259

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. FISHER FOR OHIO

Mailing Address P.O. BOX 1418

City	State	Zip Code
COLUMBUS	OH	43216

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LEE IRWIN FISHEROffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: OH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		17		2009

Transaction ID : SB23.107260

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. FRANKEN RECOUNT FUND

Mailing Address 255 E. PLATO BLVD

City	State	Zip Code
ST. PAUL	MN	55107

Purpose of Disbursement
CONTRIBUTION

Candidate Name

AL FRANKENOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼

State: MN District: 00

Recount

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107223

Amount of Each Disbursement this Period

5000.00

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

15000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF CHRIS DODD

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	25	/	2009

Mailing Address P O BOX 331133

City	State	Zip Code
WEST HARTFORD	CT	06133-1133

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CHRISTOPHER J DODDCategory/
Type

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District: 00

Transaction ID : SB23.107165

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF CONGRESSMAN TIM HOLDEN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2009

Mailing Address PO BOX 37

City	State	Zip Code
ST CLAIR	PA	17970

Purpose of Disbursement
CONTRIBUTION

Candidate Name

T. TIMOTHY HOLDENCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: PA District: 17

Transaction ID : SB23.107268

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF CORRINE BROWN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	23	/	2009

Mailing Address 421 NEW JERSEY AVENUE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

CORRINE BROWNCategory/
Type

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: FL District: 03

Transaction ID : SB23.107177

Amount of Each Disbursement this Period

1000.00

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

3000.00

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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)

PAGE 188 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF DAN MAFFEI

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2009

Mailing Address PO BOX 74

City	State	Zip Code
SYRACUSE	NY	13214

Transaction ID : SB23.107244Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

DANIEL B MR. MAFFEICategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 25

Full Name (Last, First, Middle Initial)

B. FRIENDS OF DICK DURBIN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		10		2009

Mailing Address PO BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Transaction ID : SB23.107187Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

RICHARD J DURBINCategory/
Type

1000.00

Office Sought:

☐ House
☒ Senate
☐ President

Disbursement For: 2014

☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF FARR

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2009

Mailing Address 227 MASSACHUSETTS AVE, NE
SUITE 302

City	State	Zip Code
WASHINGTON	DC	20002

Transaction ID : SB23.106561Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

SAM FARRCategory/
Type

1000.00

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 17

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

3000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF GEORGE MILLER

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 300 NORTH LEE ST SUITE 500

City	State	Zip Code
ALEXANDRIA	VA	22314

Transaction ID : SB23.106566Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

GEORGE MILLERCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 07

Full Name (Last, First, Middle Initial)

B. FRIENDS OF HARRY REID

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 245 2ND STREET, NE SUITE 300

City	State	Zip Code
WASHINGTON	DC	20002

Transaction ID : SB23.107242Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

HARRY REIDCategory/
Type

2000.00

Office Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF JIM MCDERMOTT

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City	State	Zip Code
MANASSAS	VA	20112

Transaction ID : SB23.107280Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JAMES MCDERMOTTCategory/
Type

2000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WA District: 07

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

6500.00

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

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

1000.00

State: CA District: 43

MM / DD / YYYY

1000.00

State: CA District: 43

02 / 18 / 2009

State: CA District: 23

3000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF MAURICE HINCHEY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2009

Mailing Address 503 CAPITOL COURT NE
SUITE 100

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

MAURICE D HINCHEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 22

Category/
Type**Transaction ID : SB23.107245**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF MAZIE HIRONO

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 677

City HONOLULU State HI Zip Code 96809

Purpose of Disbursement
CONTRIBUTION

Candidate Name

MAZIE MRS. HIRONOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: HI District: 02

Category/
Type**Transaction ID : SB23.107183**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF PATRICK KENNEDY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 77047

City WASHINGTON State DC Zip Code 20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PATRICK J KENNEDYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: RI District: 01

Category/
Type**Transaction ID : SB23.107273**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 192 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF PHIL HARE

Mailing Address PO BOX 4183

City	State	Zip Code
ROCK ISLAND	IL	61204-4183

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PHILIP G HAREOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107189

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. FRIENDS OF PHIL HARE

Mailing Address PO BOX 4183

City	State	Zip Code
ROCK ISLAND	IL	61204-4183

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PHILIP G HAREOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 17

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		25		2009

Transaction ID : SB23.107192

Amount of Each Disbursement this Period

4000.00

Full Name (Last, First, Middle Initial)

C. FRIENDS OF ROSA DELAURO

Mailing Address 729 15TH STREET, NW - 3RD FLR

City	State	Zip Code
WASHINGTON	DC	20005

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROSA DELAUROOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106581

Amount of Each Disbursement this Period

1000.00

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

6000.00

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

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

Three credit cards are shown side-by-side. The first card displays the number 06, the second displays 23, and the third displays 2009. Each card has a small logo in the top left corner and a small chip in the top right corner.

1000.00

5000.00

2500.00

8500.00

**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 194 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GENE GREEN CONGRESSIONAL CAMPAIGN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 16128

City	State	Zip Code
HOUSTON	TX	77222

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RAYMOND E. 'GENE' GREEN

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: TX District: 29

Category/
Type**Transaction ID : SB23.106620**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GERRY CONNOLLY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 563

City	State	Zip Code
MERRIFIELD	VA	22116

Purpose of Disbursement
CONTRIBUTION

Candidate Name

GERRY CONNOLLY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: VA District: 11

Category/
Type**Transaction ID : SB23.107276**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. GERRY CONNOLLY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Mailing Address PO BOX 563

City	State	Zip Code
MERRIFIELD	VA	22116

Purpose of Disbursement
CONTRIBUTION

Candidate Name

GERRY CONNOLLY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: VA District: 11

Category/
Type**Transaction ID : SB23.107277**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. GERRY CONNOLLY FOR CONGRESS

Mailing Address PO BOX 563

City	State	Zip Code
MERRIFIELD	VA	22116

Purpose of Disbursement
CONTRIBUTION

Candidate Name

GERRY CONNOLLYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: VA District: 11

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	23	/	2009

Transaction ID : SB23.107428

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. HIGGINS FOR CONGRESS

Mailing Address PO BOX 28

City	State	Zip Code
BUFFALO	NY	14220

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BRIAN HIGGINSOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 27

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2009

Transaction ID : SB23.107423

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. HOYER FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

STENY HAMILTON HOYEROffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	21	/	2009

Transaction ID : SB23.106597

Amount of Each Disbursement this Period

1500.00

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

3500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. HOYER FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		15		2009

Mailing Address PO BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

STENY HAMILTON HOYER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MD District: 05

Category/
Type**Transaction ID : SB23.107414**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. ILLINOIS TENTH CONGRESSIONAL

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		08		2009

Mailing Address PO BOX 523

City	State	Zip Code
DEERFIELD	IL	60015

Purpose of Disbursement
MEMBERSHIP DUES

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Category/
Type**Transaction ID : SB23.107650**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. INSLEE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 33027

City	State	Zip Code
SEATTLE	WA	98133

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JAY R MR. INSLEE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: WA District: 01

Category/
Type**Transaction ID : SB23.107282**

Amount of Each Disbursement this Period

1000.00

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

5000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JEFF MERKLEY FOR OREGON

Mailing Address PO BOX 29136

City PORTLAND	State OR	Zip Code 97296
------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JEFFREY ALAN MERKLEY

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2014
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: OR District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2009

Transaction ID : SB23.107265

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JESSE JACKSON, JR FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JESSE L JR JACKSON

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		20		2009

Transaction ID : SB23.107188

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JESSE JACKSON, JR FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JESSE L JR JACKSON

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		11		2009

Transaction ID : SB23.107410

Amount of Each Disbursement this Period

1000.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JESSE JACKSON, JR FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE SE

City WASHINGTON	State DC	Zip Code 20003
--------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JESSE L JR JACKSONOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		11		2009

Transaction ID : SB23.107411

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

B. JIM HIMES FOR CONGRESSMailing Address BOX 456
65 HIGH RIDGE ROAD

City STAMFORD	State CT	Zip Code 06905
------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JIM HIMESOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CT District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Transaction ID : SB23.107166

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

C. JOHN ADLER FOR CONGRESS

Mailing Address PO BOX 1024

City MOUNT LAUREL	State NJ	Zip Code 08054-1024
----------------------	-------------	------------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN H ADLEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Transaction ID : SB23.107235

Amount of Each Disbursement this Period

1000.00

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

6500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOHN D. DINGELL FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2009

Mailing Address PO BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN D MR. DINGELL

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MI District: 15

Category/
Type**Transaction ID : SB23.107216**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHN HALL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		06		2009

Mailing Address 420 MAIN STREET

City	State	Zip Code
BEACON	NY	12508

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN JOSEPH HALL

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 19

Category/
Type**Transaction ID : SB23.107255**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOHN LEWIS FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2009

Mailing Address 4212 37TH ST., NW

City	State	Zip Code
WASHINGTON	DC	20008

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN MR. LEWIS

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District: 05

Category/
Type**Transaction ID : SB23.107181**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOHN LEWIS FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address 4212 37TH ST., NW

City	State	Zip Code
WASHINGTON	DC	20008

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN MR. LEWIS

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: GA District: 05

Transaction ID : SB23.107182

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. JOHN SALAZAR FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Mailing Address PO BOX 1737

City	State	Zip Code
ALAMOSA	CO	81101

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN T SALAZAR

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CO District: 03

Transaction ID : SB23.106579

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JOHN SPRATT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		27		2009

Mailing Address P.O. BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN M JR SPRATT

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SC District: 05

Transaction ID : SB23.106617

Amount of Each Disbursement this Period

1500.00

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

3500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. JOHN SPRATT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2009

Mailing Address P.O. BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN M JR SPRATT

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: SC District: 05

Category/
Type**Transaction ID : SB23.107427**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

B. JOHN TIERNEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2009

Mailing Address PO BOX 8013

City	State	Zip Code
SALEM	MA	01970

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOHN F TIERNEY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MA District: 06

Category/
Type**Transaction ID : SB23.107413**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. JUDY CHU FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2009

Mailing Address 1531 PURDUE AVE.

City	State	Zip Code
LOS ANGELES	CA	90025

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JUDY CHU

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2009
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼
Special-General

State: CA District: 32

Category/
Type**Transaction ID : SB23.107405**

Amount of Each Disbursement this Period

500.00

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

3000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 202 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KATHY DAHLKEMPER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address 1921 W. 8TH STREET

City	State	Zip Code
ERIE	PA	16505

Transaction ID : SB23.107266Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KATHLEEN ANN DAHLKEMPERCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

Full Name (Last, First, Middle Initial)

B. KATHY DAHLKEMPER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2009

Mailing Address 1921 W. 8TH STREET

City	State	Zip Code
ERIE	PA	16505

Transaction ID : SB23.107267Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KATHLEEN ANN DAHLKEMPERCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

Full Name (Last, First, Middle Initial)

C. KATHY DAHLKEMPER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		08		2009

Mailing Address 1921 W. 8TH STREET

City	State	Zip Code
ERIE	PA	16505

Transaction ID : SB23.107272Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KATHLEEN ANN DAHLKEMPERCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

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

4500.00

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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)

PAGE 203 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KATHY DAHLKEMPER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		23		2009

Mailing Address 1921 W. 8TH STREET

City	State	Zip Code
ERIE	PA	16505

Transaction ID : SB23.107424Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KATHLEEN ANN DAHLKEMPERCategory/
Type

500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 03

Full Name (Last, First, Middle Initial)

B. KEITH ELLISON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 11818

City	State	Zip Code
MINNEAPOLIS	MN	56002

Transaction ID : SB23.106604Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KEITH MAURICE ELLISONCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 05

Full Name (Last, First, Middle Initial)

C. KEITH ELLISON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address PO BOX 11818

City	State	Zip Code
MINNEAPOLIS	MN	56002

Transaction ID : SB23.107225Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

KEITH MAURICE ELLISONCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MN District: 05

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. KENTUCKY DEMOCRATIC PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		04		2009

Mailing Address P.O. BOX 694

City	State	Zip Code
FRANKFORT	KY	40602

Transaction ID : SB23.106593Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. KILDEE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Transaction ID : SB23.107214Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

DALE KILDEE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2010
	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: MI District: 05

Full Name (Last, First, Middle Initial)

C. KILDEE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		04		2009

Mailing Address PO BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Transaction ID : SB23.107215Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/
Type

5000.00

DALE KILDEE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2010
	<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼

State: MI District: 05

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 Page

FOR LINE NUMBER:
(check only one)

PAGE 205 OF 235

☐ 21b ☐ 22 ☒ 23 ☐ 24 ☐ 25 ☐ 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. KIND FOR CONGRESS

Mailing Address P O BOX 184

City
LACROSSE

State
WI

Zip Code
54602-0184

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RON KIND

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y
02 / 17 / 2009

Transaction ID : SB23.106623

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. KIND FOR CONGRESS

Mailing Address P O BOX 184

City
LACROSSE

State
WI

Zip Code
54602-0184

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RON KIND

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: WI District: 03

Date of Disbursement

M M / D D / Y Y Y Y Y
06 / 04 / 2009

Transaction ID : SB23.107430

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR ARIZONA

Mailing Address 141 S. MC CORMICK ST.
SUITE 100

City
PRESCOTT

State
AZ

Zip Code
86303

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ANN KIRKPATRICK

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 01

Date of Disbursement

M M / D D / Y Y Y Y Y
03 / 23 / 2009

Transaction ID : SB23.107157

Amount of Each Disbursement this Period

1000.00

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

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

3000.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 207 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LARRY KISSELL FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	30	/	2009

Mailing Address 106 EAST MAIN STREET

City	State	Zip Code
BISCOE	NC	27209

Transaction ID : SB23.107232Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

LARRY W KISSELLCategory/
Type

1500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NC District: 08

Full Name (Last, First, Middle Initial)

B. LARSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	04	/	2009

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City	State	Zip Code
MANASSAS	VA	20112

Transaction ID : SB23.107163Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOHN B LARSONCategory/
Type

500.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District: 01

Full Name (Last, First, Middle Initial)

C. LARSON FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	15	/	2009

Mailing Address 6282 OCCOQUAN FOREST DRIVE

City	State	Zip Code
MANASSAS	VA	20112

Transaction ID : SB23.107167Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOHN B LARSONCategory/
Type

250.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CT District: 01

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 Page

 FOR LINE NUMBER:
 (check only one)

PAGE 208 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LEADERSHIP FOR TODAY AND TOMORROW

Mailing Address 625 3RD STREET NE SUITE #2

City	State	Zip Code
WASHINGTON	DC	20002

Purpose 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
04		29		2009

Transaction ID : SB23.107171

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LEVIN FOR CONGRESS COMMITTEE

Mailing Address 436 NEW JERSY AVENUE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

SANDER M MR LEVIN

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106603

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LEVIN FOR CONGRESS COMMITTEE

Mailing Address 436 NEW JERSY AVENUE SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

SANDER M MR LEVIN

 Office Sought: ☒ House
☐ Senate
☐ President

 Disbursement For: 2010 ☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 12

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Transaction ID : SB23.107221

Amount of Each Disbursement this Period

4000.00

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

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

6000.00

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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)

PAGE 209 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LOEBSACK FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Mailing Address 385 EAST COLLEGE ST.

City	State	Zip Code
IOWA CITY	IA	52314

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DAVID WAYNE LOEBSACKCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 02

Transaction ID : SB23.107184

Amount of Each Disbursement this Period

1000.00

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
06		23		2009

Mailing Address 385 EAST COLLEGE ST.

City	State	Zip Code
IOWA CITY	IA	52314

Purpose of Disbursement
CONTRIBUTION

Candidate Name

DAVID WAYNE LOEBSACKCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IA District: 02

Transaction ID : SB23.107408

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LONE STAR FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		20		2009

Mailing Address P O BOX 75214

City	State	Zip Code
WASHINGTON	DC	20013-5214

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID : SB23.107172

Amount of Each Disbursement this Period

5000.00

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

7000.00

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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)

PAGE 210 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LOUISE SLAUGHTER REELECTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address P.O. BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LOUISE MCINTOSH SLAUGHTER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 28

Category/
Type**Transaction ID : SB23.107248**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. LOUISE SLAUGHTER REELECTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		29		2009

Mailing Address P.O. BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LOUISE MCINTOSH SLAUGHTER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 28

Category/
Type**Transaction ID : SB23.107253**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LOUISE SLAUGHTER REELECTION COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address P.O. BOX 2884

City	State	Zip Code
WASHINGTON	DC	20013

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LOUISE MCINTOSH SLAUGHTER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 28

Category/
Type**Transaction ID : SB23.107257**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. LUCILLE ROYBAL-ALLARD FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 3415 S SEPULVEDA BLVD
SUITE 640

City LOS ANGELES State CA Zip Code 90034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

LUCILLE ROYBAL-ALLARDOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 34

Transaction ID : SB23.107159

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MARKEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Mailing Address PO BOX 1333

City FORT COLLINS State CO Zip Code 80522

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ELIZABETH HELEN MARKEYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 04

Transaction ID : SB23.106580

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MASSA FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 15 STATE STREET

City PITTSFORD State NY Zip Code 14534

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ERIC J J MASSAOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 29

Transaction ID : SB23.107249

Amount of Each Disbursement this Period

1000.00

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

3000.00

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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)

PAGE 213 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. MIKE ROSS FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2009

Mailing Address PO BOX 360

City
PRESCOTTState
ARZip Code
71857-0360Purpose of Disbursement
CONTRIBUTION

Candidate Name

MICHAEL AVERY ROSSCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AR District: 04

Transaction ID : SB23.106557

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MIKE THOMPSON FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2009

Mailing Address 442 NEW JERSEY AVE S.E.

City
WASHINGTONState
DCZip Code
20003Purpose of Disbursement
CONTRIBUTION

Candidate Name

MIKE MR. THOMPSONCategory/
TypeOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 01

Transaction ID : SB23.106573

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. MIKULSKI FOR US SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	17	/	2009

Mailing Address PO BOX 13147

City
BALTIMOREState
MDZip Code
21203Purpose of Disbursement
CONTRIBUTION

Candidate Name

BARBARA MIKULSKICategory/
TypeOffice Sought: ☐ House
☒ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MD District: 00

Transaction ID : SB23.106599

Amount of Each Disbursement this Period

1000.00

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

3000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

1000.00

1000.00

5000.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. NADLER FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2009

Mailing Address 18 EAST 16TH STREET, SUITE 401

City	State	Zip Code
NEW YORK	NY	10003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JERROLD L MR. NADLER

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 08

Transaction ID : SB23.107252

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. NATIONAL LEADERSHIP PAC

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 5577

City	State	Zip Code
NEW YORK	NY	10027

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: District:

Transaction ID : SB23.107247

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. NITA LOWEY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Mailing Address 38 IVY STREET SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

NITA M LOWEY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NY District: 18

Transaction ID : SB23.107246

Amount of Each Disbursement this Period

1000.00

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

4500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 216 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. OTTAWA COUNTY DEMOCARTIC PARTY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01		27		2009

Mailing Address P.O. BOX 1792

City	State	Zip Code
HOLLAND	MI	48422-1792

Transaction ID : SB23.106601Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

1500.00

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify) ▼	

State: District:

Full Name (Last, First, Middle Initial)

B. PALLONE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 3176

City	State	Zip Code
LONG BRANCH	NJ	07740

Transaction ID : SB23.106610Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

1000.00

FRANK JR. PALLONE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2010	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 06

Full Name (Last, First, Middle Initial)

C. PALLONE FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Mailing Address PO BOX 3176

City	State	Zip Code
LONG BRANCH	NJ	07740

Transaction ID : SB23.107237Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

Category/ Type

1000.00

FRANK JR. PALLONE

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	2010	<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
		<input type="checkbox"/> Other (specify) ▼	

State: NJ District: 06

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

3500.00

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PASCRELL FOR CONGRESS

Mailing Address 63 QUARTZ LANE

City	State	Zip Code
PATERSON	NJ	07501

Purpose of Disbursement
CONTRIBUTION

Candidate Name

WILLIAM J HON. JR. PASCRELL

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NJ District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107236

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PASTOR FOR ARIZONA COMMITTEE

Mailing Address PO BOX 6554

City	State	Zip Code
PHOENIX	AZ	85005-6554

Purpose of Disbursement
CONTRIBUTION

Candidate Name

EDWARD L PASTOR

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: AZ District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107158

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. PAUL HODES FOR SENATE

Mailing Address 122 C STREET NW SUITE 505

City	State	Zip Code
WASHINGTON	DC	20001

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PAUL W HODES

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NH District: 00

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2009

Transaction ID : SB23.107420

Amount of Each Disbursement this Period

2500.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PAUL TONKO FOR CONGRESS

Mailing Address 706 MADISON AVE

City	State	Zip Code
ALBANY	NY	12208

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PAUL DAVID TONKOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 21

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		04		2009

Transaction ID : SB23.107422

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. PELOSI FOR CONGRESS

Mailing Address 1 BUSH ST SUITE 250

City	State	Zip Code
SAN FRANCISCO	CA	94104

Purpose of Disbursement
CONTRIBUTION

Candidate Name

NANCY PELOSIOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 08

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Transaction ID : SB23.106568

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

C. PERLMUTTER FOR CONGRESS

Mailing Address 2545 YOUNGFIELD ST.

City	State	Zip Code
GOLDEN	CO	80401

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ED PERLMUTTEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CO District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106578

Amount of Each Disbursement this Period

1000.00

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

4500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. PETERS FOR MICHIGAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		30		2009

Mailing Address P.O. BOX 226

City	State	Zip Code
BLOOMFIELD HILLS	MI	48303

Transaction ID : SB23.107220Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

GARY PETERSCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Full Name (Last, First, Middle Initial)

B. PETERS FOR MICHIGAN

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		23		2009

Mailing Address P.O. BOX 226

City	State	Zip Code
BLOOMFIELD HILLS	MI	48303

Transaction ID : SB23.107417Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

GARY PETERSCategory/
Type

2500.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 09

Full Name (Last, First, Middle Initial)

C. PETER WELCH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		15		2009

Mailing Address 10 G STREET NE
SUITE 470

City	State	Zip Code
WASHINGTON	DC	20002

Transaction ID : SB23.107429Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

PETER WELCHCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: VT District: 00

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

6000.00

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. QUIGLEY FOR CONGRESS

Mailing Address 500 N. DEARBORN #518

City
CHICAGOState
ILZip Code
60654Purpose of Disbursement
CONTRIBUTION

Candidate Name

MIKE QUIGLEYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2009

☐ Primary ☐ General☒ Other (specify) ▼

Special-General

State: IL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		01		2009

Transaction ID : SB23.107295

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. QUIGLEY FOR CONGRESS

Mailing Address 500 N. DEARBORN #518

City
CHICAGOState
ILZip Code
60654Purpose of Disbursement
CONTRIBUTION

Candidate Name

MIKE QUIGLEYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2009

☒ Primary ☐ General☐ Other (specify) ▼

State: IL District: 05

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04		08		2009

Transaction ID : SB23.107195

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RANGEL FOR CONGRESS 2000

Mailing Address PO BOX 5577

City
NEW YORKState
NYZip Code
10027Purpose of Disbursement
CONTRIBUTION

Candidate Name

CHARLES P RANGELOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General☐ Other (specify) ▼

State: NY District: 15

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06		04		2009

Transaction ID : SB23.107421

Amount of Each Disbursement this Period

250.00

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

10250.00

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

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary 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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RAUL GRIJALVA FOR CONGRESS

Mailing Address PO BOX 1242

City
TUCSONState
AZZip Code
85702-1242Purpose of Disbursement
CONTRIBUTION

Candidate Name

RAUL M MR. GRIJALVAOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: AZ District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107156

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. RE-ELECT MCGOVERN COMMITTEE

Mailing Address PO BOX 60405

City
WORCESTERState
MAZip Code
01606-0405Purpose of Disbursement
CONTRIBUTION

Candidate Name

JIM P MCGOVERNOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MA District: 03

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106595

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. ROBERT WEXLER FOR CONGRESS COMMITTEEMailing Address 2500 N. MILITARY TRAIL
SUITE 288City
BOCA RATONState
FLZip Code
33431Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROBERT WEXLEROffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: FL District: 19

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107176

Amount of Each Disbursement this Period

1000.00

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

3000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. ROBIN CARNAHAN FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2009

Mailing Address PO BOX 50378

City	State	Zip Code
ST. LOUIS	MO	63105

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROBIN CARNAHAN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MO District: 00

Category/
Type**Transaction ID : SB23.107227**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. ROBIN CARNAHAN FOR SENATE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	10	/	2009

Mailing Address PO BOX 50378

City	State	Zip Code
ST. LOUIS	MO	63105

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ROBIN CARNAHAN

Office Sought:	<input type="checkbox"/> House
	<input checked="" type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MO District: 00

Category/
Type**Transaction ID : SB23.107228**

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. RUSH HOLT FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
04	/	29	/	2009

Mailing Address P O BOX 782

City	State	Zip Code
PENNINGTON	NJ	08534

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RUSH D HOLT

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: NJ District: 12

Category/
Type**Transaction ID : SB23.107238**

Amount of Each Disbursement this Period

1000.00

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

11000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 224 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. RUSS CARNAHAN FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Mailing Address 7370 MANCHESTER, SUITE 20

City	State	Zip Code
ST. LOUIS	MO	63143

Purpose of Disbursement
CONTRIBUTION

Candidate Name

RUSS CARNAHAN

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: MO District: 03

Category/
Type**Transaction ID : SB23.106607**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SANDERS FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		20		2009

Mailing Address PO BOX 391

City	State	Zip Code
BURLINGTON	VT	05402

Purpose of Disbursement
CONTRIBUTION

Candidate Name

BERNARD SANDERS

Office Sought:	<input type="checkbox"/> House
	<input checked="" 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: VT District: 00

Category/
Type**Transaction ID : SB23.107279**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. SCHAKOWSKY FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 5130

City	State	Zip Code
EVANSTON	IL	60204

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JANICE D SCHAKOWSKY

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: IL District: 09

Category/
Type**Transaction ID : SB23.106586**

Amount of Each Disbursement this Period

1000.00

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

3000.00

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	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

**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"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SCHWARTZ FOR CONGRESS

Mailing Address PO BOX 45706

City	State	Zip Code
PHILADELPHIA	PA	19149

Purpose of Disbursement
CONTRIBUTION

Candidate Name

ALLYSON Y SCHWARTZOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 13

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	30	/	2009

Transaction ID : SB23.107270

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. SCOTT MURPHY FOR CONGRESS

Mailing Address 3 WARREN STREET

City	State	Zip Code
GLENS FALLS	NY	12801

Purpose of Disbursement
CONTRIBUTION

Candidate Name

SCOTT M MURPHYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2009
☐ Primary ☐ General
☒ Other (specify) ▼
Special-General

State: NY District: 20

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	27	/	2009

Transaction ID : SB23.107298

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. SERRANO FOR CONGRESS

Mailing Address 421 NEW JERSEY AVENUE, SE

City	State	Zip Code
WASHINGTON	DC	20003

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOSE E SERRANOOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NY District: 16

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	01	/	2009

Transaction ID : SB23.107254

Amount of Each Disbursement this Period

1000.00

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

3500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SESTAK FOR CONGRESS

Mailing Address PO BOX 16

City MEDIA	State PA	Zip Code 19063
---------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOSEPH A. JR. SESTAKOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		30		2009

Transaction ID : SB23.107271

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. SESTAK FOR CONGRESS

Mailing Address PO BOX 16

City MEDIA	State PA	Zip Code 19063
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Purpose of Disbursement
CONTRIBUTION

Candidate Name

JOSEPH A. JR. SESTAKOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☐ Primary ☒ General
☐ Other (specify) ▼

State: PA District: 07

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		25		2009

Transaction ID : SB23.107426

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

C. SHELLEY BERKLEY FOR CONGRESS

Mailing Address 7432 SILVER PALM COURT

City LAS VEGAS	State NV	Zip Code 89117
-------------------	-------------	-------------------

Purpose of Disbursement
CONTRIBUTION

Candidate Name

SHELLEY BERKLEYOffice Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2010

☒ Primary ☐ General
☐ Other (specify) ▼

State: NV District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107243

Amount of Each Disbursement this Period

2000.00

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

12000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 229 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. SHERMAN FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 20929 VENTURA BLVD, BOX 615

City	State	Zip Code
WOODLAND HILLS	CA	91364

Transaction ID : SB23.106572Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

BRAD MR SHERMANCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: CA District: 27

Full Name (Last, First, Middle Initial)

B. STEVE ROTHMAN FOR CONGRESS INC.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 38 IVY STREET, S.E.

City	State	Zip Code
WASHINGTON	DC	20003

Transaction ID : SB23.106609Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

STEVEN R ROTHMANCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: NJ District: 09

Full Name (Last, First, Middle Initial)

C. STUPAK FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address 998 NORTH ROYAL ST

City	State	Zip Code
ALEXANDRIA	VA	22314

Transaction ID : SB23.106602Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

BART STUPAKCategory/
Type

1000.00

Office Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MI District: 01

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

3000.00

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	21b		22	✗	23		24		25		26
	27		28a		28b		28c		29		30b

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

A. STUPAK FOR CONGRESS

BART STUPAK

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

1000.00

B. TIM BISHOP FOR CONGRESS

MM / DD / YYYY

TIMOTHY BISHOP

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

State: NY District: 01

Transaction ID : SB23.106612

Amount of Each Disbursement this Period

1000.00

C. TITUS FOR CONGRESS

DINA TITUS

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

State: NV District: 03

Transaction ID : SB23.107240

Amount of Each Disbursement this Period

Age Group	Number of people
0-14	~400
15-24	~400
25-34	~400
35-44	~400
45-54	~400
55-64	~400
65-74	~500
75-84	~400
85+	~300

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

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

3000.00

A diagram of a rectangular frame. It consists of a horizontal beam at the top and a horizontal beam at the bottom, connected by vertical supports. The top beam has several small rectangular protrusions along its length. The bottom beam has several small rectangular protrusions along its length. The vertical supports are represented by short vertical lines connecting the top and bottom beams.

	21b		22	X	23		24		25		26
	27		28a		28b		28c		29		30b

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

A. VAN HOLLEN FOR CONGRESS

Date of Disbursement

Transaction ID : SB23.107207

Amount of Each Disbursement this Period

1000.00

CHRIS VAN HOLLEN

Category/
Type

Disbursement For: 2010

☒ Primary ☐ General

☐ Other (specify) ▼

State: MD District: 08

B. VICTORY NOW PAC

Date of Disbursement

MM / DD / YYYY

Transaction ID : SB23.107208

Amount of Each Disbursement this Period

1000.00

Candidate Name

Category/
Type

Disbursement For:

☐ Primary ☐ General

☐ Other (specify) ▼

State: District:

C. VICTORY NOW PAC

Date of Disbursement

Transaction ID : SB23.107415

Amount of Each Disbursement this Period

A diagram of a rectangular frame structure. It consists of a horizontal top beam and a horizontal bottom beam, connected by four vertical supports. The supports are located at the left end, and at three equally spaced intervals along the length of the beams. This represents a continuous beam supported by four columns.

2500.00

Candidate Name

Category/
Type

Disbursement For:

<input type="checkbox"/>	Primary	<input type="checkbox"/>	General
<input type="checkbox"/>	Other (specify) ▼		

State: District:

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

4500.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. VISCLOSKY FOR CONGRESS

Mailing Address PO BOX 10003

City	State	Zip Code
MERRILLVILLE	IN	46411

Purpose of Disbursement
CONTRIBUTION

Candidate Name

PETER J VISCLOSKYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: IN District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Transaction ID : SB23.107201

Amount of Each Disbursement this Period

5000.00

Full Name (Last, First, Middle Initial)

B. WILLIAM CLAY, JR FOR CONGRESS

Mailing Address PO BOX 3146

City	State	Zip Code
ST LOUIS	MO	63130

Purpose of Disbursement
CONTRIBUTION

Candidate Name

WILLIAM LACY JR CLAYOffice Sought: ☒ House
☐ Senate
☐ PresidentDisbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

State: MO District: 01

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		18		2009

Transaction ID : SB23.106605

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. WOLVERINE PAC

Mailing Address 607 14TH STREET, NW

City	State	Zip Code
WASHINGTON	DC	20005

Purpose 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
03		04		2009

Transaction ID : SB23.107169

Amount of Each Disbursement this Period

5000.00

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

11000.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. WOOLSEY FOR CONGRESS COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		17		2009

Mailing Address PO BOX 750176

City	State	Zip Code
PETALUMA	CA	94975

Transaction ID : SB23.106567Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

LYNN C WOOLSEYCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: CA District: 06

Full Name (Last, First, Middle Initial)

B. YARMUTH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 1815 BROWNSBORO ROAD

City	State	Zip Code
LOUISVILLE	KY	40202

Transaction ID : SB23.107202Purpose of Disbursement
CONTRIBUTION

Amount of Each Disbursement this Period

Candidate Name

JOHN A MR YARMUTHCategory/
Type

1000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 03

Full Name (Last, First, Middle Initial)

C. YARMUTH FOR CONGRESS

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		23		2009

Mailing Address 1815 BROWNSBORO ROAD

City	State	Zip Code
LOUISVILLE	KY	40202

Transaction ID : SB23.107203Purpose of Disbursement
CONTRIBUTUION

Amount of Each Disbursement this Period

Candidate Name

JOHN A MR YARMUTHCategory/
Type

4000.00

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2010
<input checked="" type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

State: KY District: 03

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

6000.00

410500.00

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 234 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. CHET CULVER COMMITTEE

Mailing Address PO BOX 6068

City
DES MOINESState
IAZip Code
50309Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2010
☐ Primary ☒ General
☐ Other (specify) ▼

State: IA District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	15	/	2009

Transaction ID : SB29.107647

Amount of Each Disbursement this Period

12500.00

Full Name (Last, First, Middle Initial)

B. MISSOURI STATE DEMOCRATIC PARTY

Mailing Address P.O. BOX 719

City
JEFFERSON CITYState
MOZip Code
65102Purpose of Disbursement
Contrib. For Admin Cost & Non-Fed

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
04	/	01	/	2009

Transaction ID : SB29.107655

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

C. NAACP

Mailing Address 4805 MT. HOPE DRIVE

City
BALTIMOREState
MDZip Code
21215Purpose 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 Y
03	/	24	/	2009

Transaction ID : SB29.107653

Amount of Each Disbursement this Period

100000.00

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

122500.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 235 OF 235

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

A. NJ UAW CAP COUNCIL

Mailing Address 56 VINEYARD ROAD

City
EDISONState
NJZip Code
08817Purpose of Disbursement
REPLENISH NJ UAW CAP ACCOUNT

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
06	/	23	/	2009

Transaction ID : SB29.107431

Amount of Each Disbursement this Period

20000.00

Full Name (Last, First, Middle Initial)

B. UAW REGION 3 VICTORY FUND

Mailing Address 5850 FORTUNE CIRCLE WEST

City
INDIANAPOLISState
INZip Code
46241Purpose of Disbursement
REPLENISHMENT

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
05	/	20	/	2009

Transaction ID : SB29.107288

Amount of Each Disbursement this Period

50000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

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
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Amount of Each Disbursement this Period

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

70000.00

192500.00
