

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU GOPE)

ADDRESS (number and street) 30 EAST 29TH STREET

Check if different than previously reported. (ACC) NEW YORK NY 10016

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00174011

3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

- April 15 Quarterly Report(Q1)
- July 15 Quarterly Report(Q2)
- October 15 Quarterly Report(Q3)
- January 31 Quarterly Report(YE)
- July 31 Mid-Year Report(Non-election Year Only) (MY)
- Termination Report (TER)

- (b) Monthly Report Due On:
- |                                      |                                      |                                       |  |
|--------------------------------------|--------------------------------------|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day **PRE**-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12G) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day **Post**-Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 2009 through 06 30 2009

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 STUART APPELBAUM

Signature of Treasurer Electronically Filed by STUART APPELBAUM Date 07 17 2009

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

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

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

Write or Type Committee Name

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <input type="text" value="2009"/>		63111.50
(b) Cash on Hand at Beginning of Reporting Period .....	63111.50	
(c) Total Receipts (from Line 19) .....	25633.28	25633.28
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	88744.78	88744.78
7. Total Disbursements (from Line 31) .....	46300.00	46300.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	42444.78	42444.78
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

Report Covering the Period: From:    To:

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) .....	1525.00	1525.00
(ii) Unitemized .....	24108.28	24108.28
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	25633.28	25633.28
(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) .....	25633.28	25633.28
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)) .....	25633.28	25633.28
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	25633.28	25633.28

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	35800.00	35800.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	10500.00	10500.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	46300.00	46300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46300.00	46300.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	25633.28	25633.28
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	25633.28	25633.28
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	0.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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

NAME OF COMMITTEE (In Full)  
**RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)**

<p><b>A.</b> Full Name (Last, First, Middle Initial) RANDY BELLIEL</p> <p>Mailing Address 3773 ALGONAC DR SW</p> <p>City State Zip Code  <b>GRANDVILLE MI 49418</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  RWDSU REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">240.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">04 / 30 / 2009</span></p> <p><b>Transaction ID: SA11AI.19931</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">80.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) RANDY BELLIEL</p> <p>Mailing Address 3773 ALGONAC DR SW</p> <p>City State Zip Code  <b>GRANDVILLE MI 49418</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  RWDSU REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">340.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">05 / 21 / 2009</span></p> <p><b>Transaction ID: SA11AI.20305</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">100.00</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) RANDY BELLIEL</p> <p>Mailing Address 3773 ALGONAC DR SW</p> <p>City State Zip Code  <b>GRANDVILLE MI 49418</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation                  RWDSU REPRESENTATIVE</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">420.00</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">M M / D D / Y Y Y Y</span>  <span style="border: 1px solid black; padding: 2px;">06 / 18 / 2009</span></p> <p><b>Transaction ID: SA11AI.20170</b></p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">80.00</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">260.00</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 7 / 16
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

<b>A.</b>	Full Name (Last, First, Middle Initial) COSTELLO DASH	Date of Receipt MM / DD / YYYY 05 / 14 / 2009
	Mailing Address 1010 THIRD AVE	<b>Transaction ID:</b> SA11AI.20316
	City State Zip Code NEW YORK NY 10021	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LOCAL 3, RWDSU REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) RONALD DUNCAN	Date of Receipt MM / DD / YYYY 04 / 30 / 2009
	Mailing Address 6241 N GENESEE RD	<b>Transaction ID:</b> SA11AI.19932
	City State Zip Code FLINT MI 48506	Amount of Each Receipt this Period 100.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RWDSU REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) RONALD DUNCAN	Date of Receipt MM / DD / YYYY 05 / 21 / 2009
	Mailing Address 6241 N GENESEE RD	<b>Transaction ID:</b> SA11AI.20306
	City State Zip Code FLINT MI 48506	Amount of Each Receipt this Period 125.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation RWDSU REPRESENTATIVE	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 410.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	265.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 16  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
**RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)**

**A.** Full Name (Last, First, Middle Initial)  
**RONALD DUNCAN**  
 Mailing Address **6241 N GENESEE RD**  
 City **FLINT** State **MI** Zip Code **48506**  
 Date of Receipt **06 / 18 / 2009**  
**Transaction ID: SA11AI.20171**  
 Amount of Each Receipt this Period **100.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RWDSU** Occupation **REPRESENTATIVE**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **510.00**

**B.** Full Name (Last, First, Middle Initial)  
**ROGER GROBSTICH**  
 Mailing Address **2350 WOLF CREEK TRAIL**  
 City **HIAWATHA** State **IA** Zip Code **52233-7907**  
 Date of Receipt **06 / 18 / 2009**  
**Transaction ID: SA11AI.20173**  
 Amount of Each Receipt this Period **40.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RWDSU** Occupation **REPRESENTATIVE**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **210.00**

**C.** Full Name (Last, First, Middle Initial)  
**CHARLIE SR HALL**  
 Mailing Address **117 BERG CT**  
 City **DAYTONA BEACH** State **FL** Zip Code **32124**  
 Date of Receipt **03 / 31 / 2009**  
**Transaction ID: SA11AI.19847**  
 Amount of Each Receipt this Period **100.00**  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer **RWDSU RETIREE** Occupation **RETIREE**  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date ▼ **300.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **240.00**  
**TOTAL** This Period (last page this line number only) ..... ►



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 16
	<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)  
RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

<b>A.</b>	Full Name (Last, First, Middle Initial) CHARLIE SR HALL		Date of Receipt
	Mailing Address 117 BERG CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 05 / 07 / 2009
	City	State	Zip Code
	DAYTONA BEACH	FL	32124
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.20023
Name of Employer RWDSU RETIREE		Occupation RETIREE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00	100.00

<b>B.</b>	Full Name (Last, First, Middle Initial) CHARLIE SR HALL		Date of Receipt
	Mailing Address 117 BERG CT		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 04 / 2009
	City	State	Zip Code
	DAYTONA BEACH	FL	32124
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.20185
Name of Employer RWDSU RETIREE		Occupation RETIREE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 500.00	100.00

<b>C.</b>	Full Name (Last, First, Middle Initial) HENRY JENKINS		Date of Receipt
	Mailing Address 2692 20TH STREET WEST		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 01 / 22 / 2009
	City	State	Zip Code
	BIRMINGHAM	AL	35208
	FEC ID number of contributing federal political committee. <b>C</b>		Transaction ID: SA11AI.19209
Name of Employer RWDSU		Occupation REPRESENTATIVE	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00	300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 16
	<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)  
**RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)**

<b>A.</b>	Full Name (Last, First, Middle Initial) JACK WURM		Date of Receipt
	Mailing Address 6619 LAGUNA VISTA DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 04 / 30 / 2009
	City	State	Zip Code
	ROCKFORD	MI	49344
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.19930
Name of Employer RWDSU		Occupation SECRETARY-TREASURER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	<input type="text"/> 80.00

<b>B.</b>	Full Name (Last, First, Middle Initial) JACK WURM		Date of Receipt
	Mailing Address 6619 LAGUNA VISTA DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 05 / 21 / 2009
	City	State	Zip Code
	ROCKFORD	MI	49344
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20304
Name of Employer RWDSU		Occupation SECRETARY-TREASURER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 340.00	<input type="text"/> 100.00

<b>C.</b>	Full Name (Last, First, Middle Initial) JACK WURM		Date of Receipt
	Mailing Address 6619 LAGUNA VISTA DR		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 06 / 18 / 2009
	City	State	Zip Code
	ROCKFORD	MI	49344
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.20169
Name of Employer RWDSU		Occupation SECRETARY-TREASURER	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 420.00	<input type="text"/> 80.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 260.00
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/> 1525.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

<b>A.</b>	Full Name (Last, First, Middle Initial) DON PAYNE FOR CONGRESS		<b>Transaction ID:</b> SB23.20545	
	Mailing Address P.O. Box 2406		Date of Disbursement 03 / 04 / 2009	
	City Newark	State NJ	Zip Code 07114	Amount of Each Disbursement this Period 1400.00
	Purpose of Disbursement CONTRIBUTION		011	Category/ Type
Candidate Name				
Office Sought: <input checked="" 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: NJ District: 10				
<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF SCHUMER		<b>Transaction ID:</b> SB23.20542	
	Mailing Address 509 MADISON AVE SUITE 1902		Date of Disbursement 02 / 12 / 2009	
	City NEW YORK	State NY	Zip Code 10022	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement CONTRIBUTION		011	Category/ Type
Candidate Name				
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NY District: 00				
<b>C.</b>	Full Name (Last, First, Middle Initial) HILL PAC		<b>Transaction ID:</b> SB23.20570	
	Mailing Address 1825 K Street, NW Suite 1000		Date of Disbursement 01 / 16 / 2009	
	City Washington	State DC	Zip Code 20006	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement CONTRIBUTION		011	Category/ Type
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) ..... ▶

8900.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

<b>A.</b> Full Name (Last, First, Middle Initial) MALONEY FOR CONGRESS <hr/> Mailing Address 49 EAST 92ND STREET <hr/> City NEW YORK State NY Zip Code 10128 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: <hr/> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.20546 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) MCMAHON, MICHAEL E. MR. <hr/> Mailing Address 66 Arnold Street <hr/> City Staten Island State NY Zip Code 10301 <hr/> Purpose of Disbursement CONTRIBUTION Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13 <hr/> Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.20564 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 8 / 2 0 0 9
	Amount of Each Disbursement this Period 5000.00
	Category/Type 011
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) MICHIGAN DEMOCRATIC STATE CENTRAL COMMITTEE/FED ACCT <hr/> Mailing Address 606 TOWNSEND <hr/> City LANSING State MI Zip Code 48933 <hr/> Purpose of Disbursement Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.20532 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 8 / 2 0 0 9
	Amount of Each Disbursement this Period 600.00
	Category/Type 011
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

10600.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

A.	Full Name (Last, First, Middle Initial) NADLER FOR CONGRESS INC	Transaction ID: SB23.20553 Date of Disbursement																			
	Mailing Address Village Station P.O. Box 40	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>2</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	7		2	0	0	9												
	City New York State NY Zip Code 10014	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>2400.00</td></tr></table>	2400.00																		
2400.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) NEW YORK STATE COMMITTEE OF THE WORKING FAMILIES PARTY	Transaction ID: SB23.20530 Date of Disbursement																			
	Mailing Address 2-4 Nevins Street Floor 3	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>1</td><td>2</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	2		2	0	0	9												
	City BROOKLYN State NY Zip Code 11217	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>3000.00</td></tr></table>	3000.00																		
3000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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) ▼																			

C.	Full Name (Last, First, Middle Initial) NEW YORK STATE DEMOCRATIC COMMITTEE	Transaction ID: SB23.20544 Date of Disbursement																			
	Mailing Address 461 Park Avenue South 10th Floor	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	6		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	6		2	0	0	9												
	City New York State NY Zip Code 10016	Amount of Each Disbursement this Period																			
	Purpose of Disbursement CONTRIBUTION	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	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) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>10400.00</td></tr></table>	10400.00
10400.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>RANGEL FOR CONGRESS</b> <hr/> Mailing Address <b>PO Box 5577 MANHATTANVILLE STA</b> <hr/> City <b>New York</b> State <b>NY</b> Zip Code <b>10027</b> <hr/> Purpose of Disbursement <b>CONTRIBUTION</b> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NY</b> District: <b>15</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.20554</b> Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>2</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2400.00</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	2	7	/	2	0	0	9	2400.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	3	/	2	7	/	2	0	0	9															
2400.00																								
011																								
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>SCHAUER FOR CONGRESS</b> <hr/> Mailing Address <b>PO Box 100</b> <hr/> City <b>Battle Creek</b> State <b>MI</b> Zip Code <b>49016</b> <hr/> Purpose of Disbursement <b>CONTRIBUTION</b> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>MI</b> District: <b>07</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.20562</b> Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td>/</td><td>3</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6	/	3	0	/	2	0	0	9	2500.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	6	/	3	0	/	2	0	0	9															
2500.00																								
011																								
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>TIM BISHOP FOR CONGRESS</b> <hr/> Mailing Address <b>PO Box 437</b> <hr/> City <b>Farmingville</b> State <b>NY</b> Zip Code <b>11738</b> <hr/> Purpose of Disbursement <b>CONTRIBUTION</b> Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: <b>NY</b> District: <b>01</b> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID: SB23.20552</b> Date of Disbursement <table border="1" style="width: 100%;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table> <hr/> Amount of Each Disbursement this Period <table border="1" style="width: 100%; text-align: center;"> <tr> <td>1000.00</td> </tr> </table> <hr/> Category/Type <table border="1" style="width: 100%; text-align: center;"> <tr> <td>011</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3	/	1	8	/	2	0	0	9	1000.00	011
M	M	/	D	D	/	Y	Y	Y	Y															
0	3	/	1	8	/	2	0	0	9															
1000.00																								
011																								

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>5900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>35800.00</b>

**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 15 / 16

<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)  
RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

A.	Full Name (Last, First, Middle Initial) ANDREW CUOMO 2010	Transaction ID: SB29.22158 Date of Disbursement 01 / 12 / 2009
	Mailing Address CHURCH STREET STATION PO BOX 683	Amount of Each Disbursement this Period 1000.00
	City NEW YORK State NY Zip Code 10008	
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JDC GENESEE FUND	Transaction ID: SB29.20568 Date of Disbursement 04 / 08 / 2009
	Mailing Address PO Box 624	Amount of Each Disbursement this Period 1500.00
	City Fenton State MI Zip Code 48430	
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MICHIGAN DEMOCRATIC PARTY-NON FED A/C	Transaction ID: SB29.20576 Date of Disbursement 04 / 08 / 2009
	Mailing Address 606 TOWNSEND	Amount of Each Disbursement this Period 5000.00
	City LANSING State MI Zip Code 48933	
	Purpose of Disbursement CONTRIBUTION Candidate Name	011 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

7500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 16

<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)

RETAIL, WHOLESALE & DEPARTMENT STORE UNION COMMITTEE ON POLITICAL EDUCATION (RWD-SU COPE)

A.	Full Name (Last, First, Middle Initial) <b>PEOPLE FOR CHERRY</b>	<b>Transaction ID:</b> SB29.20541
	Mailing Address <b>PO BOX 18189</b>	Date of Disbursement MM / DD / YYYY <b>02 / 06 / 2009</b>
	City <b>LANSING</b> State <b>MI</b> Zip Code <b>48901</b>	Amount of Each Disbursement this Period <b>2000.00</b>
	Purpose of Disbursement <b>CONTRIBUTION</b>	<b>011</b> Category/ Type
	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) ▼
B.	Full Name (Last, First, Middle Initial) <b>THE KELLNER COMMITTEE</b>	<b>Transaction ID:</b> SB29.20560
	Mailing Address <b>217 E 85TH ST # 117</b>	Date of Disbursement MM / DD / YYYY <b>04 / 30 / 2009</b>
	City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10028</b>	Amount of Each Disbursement this Period <b>1000.00</b>
	Purpose of Disbursement <b>CONTRIBUTION</b>	<b>011</b> Category/ Type
	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) ▼

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

**3000.00**

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

**10500.00**