

# 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  
United Association Political Education Committee

ADDRESS (number and street) 901 Massachusetts Avenue, NW  
 Check if different than previously reported. (ACC)  
Washington DC 20001-4307

2. **FEC IDENTIFICATION NUMBER** C00012476  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 06 01 2007 through 06 30 2007

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 Assistant Treasurer Patrick R. Perno

Signature of Treasurer Electronically Filed by Assistant Treasurer Patrick R. Perno Date 09 10 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
United Association Political Education Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		1121309.96
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	1245316.92									
(c) Total Receipts (from Line 19) .....	219520.49	838480.69								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1464837.41	1959790.65								
7. Total Disbursements (from Line 31) .....	159770.57	654723.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1305066.84	1305066.84								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
United Association Political Education Committee

Report Covering the Period: From: 

M	M
0	6

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	0.00	1255.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	217733.32	821266.94
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	217733.32	822521.94
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	217733.32	822521.94
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	8500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1787.17	7458.75
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)) .....	219520.49	838480.69
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	219520.49	838480.69

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<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.....	2770.57	51473.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2770.57	51473.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	157000.00	578250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	0.00	25000.00
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))..	159770.57	654723.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	159770.57	654723.81

**DETAILED SUMMARY PAGE**  
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	217733.32	822521.94
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	217733.32	822521.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2770.57	51473.81
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2770.57	51473.81

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 24	
	(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"/> 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)  
United Association Political Education Committee

**A.** Full Name (Last, First, Middle Initial)  
Bank of America

Mailing Address 1501 Pennsylvania Avenue, NW

City State Zip Code  
Washington DC 20013

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
7458.75

Date of Receipt  

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	3	0	/	2	0	0	7

Transaction ID: SA17.10542

Amount of Each Receipt this Period  
1787.17

Interest

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1787.17
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1787.17

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. Complete Campaigns, Inc.</b>		<b>Transaction ID:</b> SB21B.10535 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 610 Gateway Center Way Suite K		Amount of Each Disbursement this Period 75.00
City San Diego State CA Zip Code 92102	Purpose of Disbursement Subscription Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Congressional Quarterly</b>		<b>Transaction ID:</b> SB21B.10478 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 1414 22nd Street, NW		Amount of Each Disbursement this Period 2695.57
City Washingt State DC Zip Code 20037	Purpose of Disbursement Subscription Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

2770.57

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

2770.57

**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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. ALLEN, THOMAS H</b>		<b>Transaction ID: SB23.10516</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 1 / 2 0 0 7	
Mailing Address 236 OXFORD STREET		Amount of Each Disbursement this Period 5000.00	
City PORTLAND State ME Zip Code 04101	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name ALLEN, THOMAS H			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: ME District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Melissa Bean for Congress</b>		<b>Transaction ID: SB23.10519</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7	
Mailing Address 203 Frances Lane		Amount of Each Disbursement this Period 5000.00	
City Barrington State IL Zip Code 60010	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name Melissa Bean for Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Melissa Bean for Congress</b>		<b>Transaction ID: SB23.10520</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 7 / 2 0 0 7	
Mailing Address 203 Frances Lane		Amount of Each Disbursement this Period 5000.00	
City Barrington State IL Zip Code 60010	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name Melissa Bean for Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 08	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. SIOBHAN L BENNETT</b>		<b>Transaction ID:</b> SB23.10510 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 25 SOUTH 15TH STREET		Amount of Each Disbursement this Period 5000.00
City ALLENTOWN State PA Zip Code 18102	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name SIOBHAN L BENNETT		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Tim Bishop for Congress</b>		<b>Transaction ID:</b> SB23.10502 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 816 Deer Park Avenue		Amount of Each Disbursement this Period 5000.00
City North Babylon State NY Zip Code 11703	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name Tim Bishop for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 1	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JOHN A BOCCIERI</b>		<b>Transaction ID:</b> SB23.10483 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 9830 GINGER HILL CT		Amount of Each Disbursement this Period 5000.00
City NEW MIDDLETOWN State OH Zip Code 44442	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name JOHN A BOCCIERI		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 24

<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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. BRUCE L. BRALEY</b>		Transaction ID: SB23.10498 Date of Disbursement M M / D D / Y Y Y Y 06 / 11 / 2007
Mailing Address 247 SHERIDAN ROAD		Amount of Each Disbursement this Period 5000.00
City WATERLOO State IA Zip Code 50701	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name BRUCE L BRALEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. BRUCE L. BRALEY</b>		Transaction ID: SB23.10515 Date of Disbursement M M / D D / Y Y Y Y 06 / 20 / 2007
Mailing Address 247 SHERIDAN ROAD		Amount of Each Disbursement this Period 5000.00
City WATERLOO State IA Zip Code 50701	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name BRUCE L. BRALEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IA District: 01	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. NORM COLEMAN</b>		Transaction ID: SB23.10541 Date of Disbursement M M / D D / Y Y Y Y 06 / 15 / 2007
Mailing Address 7300 HUDSON BLVD SUITE 270A		Amount of Each Disbursement this Period 5000.00  <b>[MEMO ITEM]</b>
City ST PAUL State MN Zip Code 55128	Category/ Type	
Purpose of Disbursement Resignation of above cont.		
Candidate Name NORM COLEMAN		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 11 / 24

<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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. Norm COLEMAN FOR SENATE 08</b>		Transaction ID: SB23.10540 Date of Disbursement MM / DD / YYYY 03 / 29 / 2007
Mailing Address 7300 HUDSON BLVD SUITE 270A		Amount of Each Disbursement this Period 5000.00  <b>[MEMO ITEM]</b>
City ST PAUL State MN Zip Code 55128	Purpose of Disbursement As disclosed in April 2007 monthly Candidate Name NORM COLEMAN Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MN District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Full Name (Last, First, Middle Initial) <b>B. Joe Donnelly for Congress</b>		

Mailing Address P.O. Box 1961		Transaction ID: SB23.10514 Date of Disbursement MM / DD / YYYY 06 / 20 / 2007
City South Bend State IN Zip Code 46634		Amount of Each Disbursement this Period 2500.00
Purpose of Disbursement Transfer Candidate Name Joe Donnelly for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Full Name (Last, First, Middle Initial) <b>C. STEVEN LEO DRIEHAUS</b>		

Mailing Address 1018 BENZ AVENUE		Transaction ID: SB23.10492 Date of Disbursement MM / DD / YYYY 06 / 11 / 2007
City CINCINNATI State OH Zip Code 45238		Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer Candidate Name STEVEN LEO DRIEHAUS	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 01 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
Category/Type		
Full Name (Last, First, Middle Initial) STEVEN LEO DRIEHAUS		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	7500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 12 / 24

<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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. Richard DURBIN FOR SENATE</b>		<b>Transaction ID:</b> SB23.10489 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 230 S. Dearborn Street		Amount of Each Disbursement this Period 5000.00
City Chicago State IL Zip Code 60604		
Purpose of Disbursement Transfer Candidate Name Richard DURBIN FOR SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:		
Category/Type		

Full Name (Last, First, Middle Initial) <b>B. Richard DURBIN FOR SENATE</b>		<b>Transaction ID:</b> SB23.10490 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 8 / 2 0 0 7
Mailing Address 230 S. Dearborn Street		Amount of Each Disbursement this Period 5000.00
City Chicago State IL Zip Code 60604		
Purpose of Disbursement Transfer Candidate Name Richard DURBIN FOR SENATE Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District:		
Category/Type		

Full Name (Last, First, Middle Initial) <b>C. KEITH MAURICE ELLISON</b>		<b>Transaction ID:</b> SB23.10481 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 1629 BRYANT AVENUE NORTH		Amount of Each Disbursement this Period 5000.00
City MINNEAPOLIS State MN Zip Code 55411		
Purpose of Disbursement Transfer Candidate Name KEITH MAURICE ELLISON Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MN District: 05		
Category/Type		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. GABRIELLE GIFFORDS</b>		Transaction ID: SB23.10504	
Mailing Address 4330 EAST 4TH STREET		Date of Disbursement 06 / 13 / 2007	
City TUCSON	State AZ	Zip Code 85711	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name GABRIELLE GIFFORDS			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ	District: 08		

Full Name (Last, First, Middle Initial) <b>B. Nick Lampson for Congress</b>		Transaction ID: SB23.10521	
Mailing Address P.O. Box 21578		Date of Disbursement 06 / 28 / 2007	
City Beaumont	State TX	Zip Code 77720	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name Nick Lampson for Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: TX	District: 9		

Full Name (Last, First, Middle Initial) <b>C. STEVEN C LATOURETTE</b>		Transaction ID: SB23.10534	
Mailing Address 9956 JOHNNYCAVE RIDGE RD		Date of Disbursement 06 / 29 / 2007	
City PAINSSVILLE	State OH	Zip Code 44077	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name STEVEN C LATOURETTE			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH	District: 14		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. SANDER M MR LEVIN</b>		Transaction ID: SB23.10526 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7	
Mailing Address 230 North Avenue		Amount of Each Disbursement this Period 1500.00	
City Mt. Clemens State MI Zip Code 48043	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name SANDER M MR LEVIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>B. SANDER M MR LEVIN</b>		Transaction ID: SB23.10528 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7	
Mailing Address 230 North Avenue		Amount of Each Disbursement this Period 1500.00	
City Mt. Clemens State MI Zip Code 48043	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name SANDER M MR LEVIN	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12		
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

Full Name (Last, First, Middle Initial) <b>C. DANIEL WILLIAM LIPINSKI</b>		Transaction ID: SB23.10508 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7	
Mailing Address 4501 GRAND AVENUE		Amount of Each Disbursement this Period 5000.00	
City WESTERN SPRINGS State IL Zip Code 60558	Purpose of Disbursement Transfer	Category/ Type	
Candidate Name DANIEL WILLIAM LIPINSKI	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 03		
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

Use separate schedule(s)  
for each category of the  
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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. DANIEL WILLIAM LIPINSKI</b>		Transaction ID: SB23.10509 Date of Disbursement 06 / 15 / 2007
Mailing Address 4501 GRAND AVENUE		Amount of Each Disbursement this Period 5000.00
City WESTERN SPRINGS State IL Zip Code 60558	Purpose of Disbursement Transfer	
Candidate Name DANIEL WILLIAM LIPINSKI	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 03	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JAMES B JR MARLOW</b>		Transaction ID: SB23.10485 Date of Disbursement 06 / 06 / 2007
Mailing Address PO BOX 1253		Amount of Each Disbursement this Period 5000.00
City ATHENS State GA Zip Code 30603	Purpose of Disbursement Transfer	
Candidate Name JAMES B JR MARLOW	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: GA District: 10	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. ERIC JJ MASSA</b>		Transaction ID: SB23.10495 Date of Disbursement 06 / 11 / 2007
Mailing Address 170 DELEVAN AVENUE		Amount of Each Disbursement this Period 5000.00
City CORNING State NY Zip Code 14830	Purpose of Disbursement Transfer	
Candidate Name ERIC JJ MASSA	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 29	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. THADDEUS G MR. MCCOTTER</b>		<b>Transaction ID: SB23.10532</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 18430 GOLFVIEW		Amount of Each Disbursement this Period 2500.00
City LIVONIA State MI Zip Code 48152	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name THADDEUS G MR. MCCOTTER		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 11	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. JERRY MCNERNEY</b>		<b>Transaction ID: SB23.10531</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7
Mailing Address 6769 Menlo Court		Amount of Each Disbursement this Period 2500.00
City Pleasanton State Zip Code 94588	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name JERRY MCNERNEY		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. CHARLIE JR MELANCON</b>		<b>Transaction ID: SB23.10523</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address PO Box 549 PO BOX 549		Amount of Each Disbursement this Period 5000.00
City Napoleonville State LA Zip Code 70390	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name CHARLIE JR MELANCON		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: LA District: 3	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]



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

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. Michael Michaud for Congress</b>		<b>Transaction ID: SB23.10503</b>	
Mailing Address 16 Common Street		Date of Disbursement MM / DD / YYYY 06 / 13 / 2007	
City Waterville	State ME	Zip Code 04901	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name Michael Michaud for Congress			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: ME	District: 02		

Full Name (Last, First, Middle Initial) <b>B. HARRY E MITCHELL</b>		<b>Transaction ID: SB23.10505</b>	
Mailing Address 1222 E. Verlea Dr.		Date of Disbursement MM / DD / YYYY 06 / 13 / 2007	
City Tempe	State AZ	Zip Code 85282	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name HARRY E MITCHELL			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: AZ	District: 05		

Full Name (Last, First, Middle Initial) <b>C. PATRICK J MURPHY</b>		<b>Transaction ID: SB23.10524</b>	
Mailing Address 6419 Radcliffe St.		Date of Disbursement MM / DD / YYYY 06 / 28 / 2007	
City Bristol	State PA	Zip Code 19007	Amount of Each Disbursement this Period 5000.00
Purpose of Disbursement Transfer		Category/ Type	
Candidate Name PATRICK J MURPHY			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 8		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>15000.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. National Republican Committee</b>		<b>Transaction ID:</b> SB23.10536 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 320 FIRST STREET		Amount of Each Disbursement this Period -15000.00
City WASHINGTON State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Void check dated 2/21/07		
Candidate Name National Republican Committee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. National Republican Committee</b>		<b>Transaction ID:</b> SB23.10537 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 320 FIRST STREET		Amount of Each Disbursement this Period -15000.00
City WASHINGTON State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Void check dated 3/22/07		
Candidate Name National Republican Committee		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. OBEY, DAVID R</b>		<b>Transaction ID:</b> SB23.10512 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address 1212 Grand Ave #32		Amount of Each Disbursement this Period 5000.00
City Wausau State WI Zip Code 54403	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name OBEY, DAVID R		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WI District: 7	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	-25000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	(Empty box)

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

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. EDWIN PERLMUTTER</b>		<b>Transaction ID: SB23.10491</b> Date of Disbursement 06 / 11 / 2007
Mailing Address 2795 JUNIPER DRIVE		Amount of Each Disbursement this Period 5000.00
City GOLDEN State CO Zip Code 80401	Purpose of Disbursement Transfer	
Candidate Name EDWIN PERLMUTTER	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 07	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Charles Rangel for Congress</b>		<b>Transaction ID: SB23.10513</b> Date of Disbursement 06 / 20 / 2007
Mailing Address P.O. Box 5577 Manhattanville Sta 36 West 125th Street		Amount of Each Disbursement this Period 3000.00
City New York State NY Zip Code 10027	Purpose of Disbursement Transfer	
Candidate Name Charles Rangel for Congress	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 15	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. LAURA RICHARDSON</b>		<b>Transaction ID: SB23.10496</b> Date of Disbursement 06 / 11 / 2007
Mailing Address 1212 S VICTORY BLVD		Amount of Each Disbursement this Period 5000.00
City BURBANK State CA Zip Code 91502	Purpose of Disbursement Transfer	
Candidate Name LAURA RICHARDSON	Category/ Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 37	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	13000.00
<b>TOTAL</b> This Period (last page this line number only) .....	.....

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

Use separate schedule(s)  
for each category of the  
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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. PETER ROSKAM</b>		<b>Transaction ID:</b> SB23.10529 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 8 / 2 0 0 7
Mailing Address 141 Shelley Lane		Amount of Each Disbursement this Period 2500.00
City Wheaton State IL Zip Code 60187		
Purpose of Disbursement Transfer Candidate Name PETER ROSKAM Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 06	Category/Type	
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. C.A. DUTCH RUPPERSBERGER</b>		<b>Transaction ID:</b> SB23.10517 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address PO BOX 5675		Amount of Each Disbursement this Period 2500.00
City TIMONIUM State MD Zip Code 21094		
Purpose of Disbursement Transfer Candidate Name C.A. DUTCH RUPPERSBERGER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 02	Category/Type	
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Tim Ryan for Congress</b>		<b>Transaction ID:</b> SB23.10479 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 438 North Rhodes Avenue		Amount of Each Disbursement this Period 5000.00
City Niles State OH Zip Code 44446		
Purpose of Disbursement Transfer Candidate Name Tim Ryan for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17	Category/Type	
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. Tim Ryan for Congress</b>		<b>Transaction ID:</b> SB23.10501 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 1 3 / 2 0 0 7
Mailing Address 438 North Rhodes Avenue		Amount of Each Disbursement this Period 5000.00
City Niles State OH Zip Code 44446		
Purpose of Disbursement Transfer Candidate Name Tim Ryan for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 17	Category/Type	
Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>B. Linda Sanchez</b>		<b>Transaction ID:</b> SB23.10480 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 7
Mailing Address 601 S Glenoaks Blvd Ste 211		Amount of Each Disbursement this Period 5000.00
City Burbank State CA Zip Code 91502		
Purpose of Disbursement Transfer Candidate Name Linda Sanchez Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 39	Category/Type	
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) <b>C. Adam Schiff for Congress</b>		<b>Transaction ID:</b> SB23.10518 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 6 / 2 5 / 2 0 0 7
Mailing Address 425 Amherst Drive		Amount of Each Disbursement this Period 2500.00
City Burbank State CA Zip Code 91504		
Purpose of Disbursement Transfer Candidate Name Adam Schiff for Congress Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 27	Category/Type	
Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	12500.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. JOSEPH A JR SESTAK</b>		Transaction ID: SB23.10500 Date of Disbursement 06 / 11 / 2007	
Mailing Address PO BOX 16		Amount of Each Disbursement this Period 5000.00	
City MEDIA	State PA	Zip Code 19063	Category/ Type
Purpose of Disbursement Transfer			
Candidate Name JOSEPH A JR SESTAK			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: PA	District: 07		

Full Name (Last, First, Middle Initial) <b>B. ARLEN SPECTER</b>		Transaction ID: SB23.10487 Date of Disbursement 06 / 07 / 2007	
Mailing Address 4111 TIMBER LANE		Amount of Each Disbursement this Period 1000.00	
City PHILADELPHIA	State PA	Zip Code 19122	Category/ Type
Purpose of Disbursement Transfer			
Candidate Name ARLEN SPECTER			
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: PA	District: 00		

Full Name (Last, First, Middle Initial) <b>C. BETTY S MS. SUTTON</b>		Transaction ID: SB23.10522 Date of Disbursement 06 / 28 / 2007	
Mailing Address 13488 Walnut Trace		Amount of Each Disbursement this Period 5000.00	
City Chardon	State OH	Zip Code 44024	Category/ Type
Purpose of Disbursement Transfer			
Candidate Name BETTY S MS. SUTTON			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: OH	District: 13		

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	11000.00
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER:  
(check only one)

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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)  
United Association Political Education Committee

Full Name (Last, First, Middle Initial) <b>A. JON TESTER</b>		Transaction ID: SB23.10494 Date of Disbursement 06 / 11 / 2007
Mailing Address 709 SAN LANE PO BOX 1248		Amount of Each Disbursement this Period 5000.00
City BIG SANDY State MT Zip Code 59520	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name JON TESTER		
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: MT District: 00	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>B. Jerry Weller for Congress</b>		Transaction ID: SB23.10507 Date of Disbursement 06 / 13 / 2007
Mailing Address P.O. Box 15283		Amount of Each Disbursement this Period 5000.00
City Washington State DC Zip Code 20003	Category/ Type	
Purpose of Disbursement Transfer		
Candidate Name Jerry Weller for Congress		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 11	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) <b>C. JOHN A MR YARMUTH</b>		Transaction ID: SB23.10538 Date of Disbursement 03 / 20 / 2007
Mailing Address 5008 Nitta Yuma Drive		Amount of Each Disbursement this Period 5000.00  <b>[MEMO ITEM]</b>
City Harrods Creek State KY Zip Code 40027	Category/ Type	
Purpose of Disbursement As disclosed in April 2007 Monthly		
Candidate Name JOHN A MR YARMUTH		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: KY District: 3	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	10000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[Empty Box]

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee

Full Name (Last, First, Middle Initial)

**A.** JOHN A MR YARMUTH

Mailing Address 5008 Nitta Yuma Drive

City Harrods Creek State KY Zip Code 40027

Purpose of Disbursement  
Resignation of above cont.

Candidate Name  
JOHN A MR YARMUTH

Office Sought:  House  
 Senate  
 President

State: KY District: 3

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.10539

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

5000.00

**[MEMO ITEM]**

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

0.00

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

157000.00