

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

District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

ADDRESS (number and street) 444 North Capitol Street
Suite 800
 Check if different than previously reported. (ACC)
Washington DC 20001-1570

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

C00279380

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 checked="" 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 02 01 2010 through 02 28 2010

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 Bill Van Loo

Signature of Treasurer Electronically Filed by Bill Van Loo Date 03 19 2010

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

Office Use Only							
-----------------	--	--	--	--	--	--	--

FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		682662.28
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	696370.75									
(c) Total Receipts (from Line 19)	14587.35	40339.82								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	710958.10	723002.10								
7. Total Disbursements (from Line 31)	17262.00	29306.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	693696.10	693696.10								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

Report Covering the Period: From:

M	M
0	2

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	2

D	D
2	8

Y	Y	Y	Y
2	0	1	0

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)	4370.96	13625.99
(ii) Unitemized	10172.92	25773.95
(iii) TOTAL (add Lines 11(a)(i) and (ii)	14543.88	39399.94
(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)	14543.88	39399.94
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	43.47	939.88
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))	14587.35	40339.82
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	14587.35	40339.82

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	5012.00	10056.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5012.00	10056.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	9500.00	16500.00
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.....	2750.00	2750.00
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))..	17262.00	29306.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	17262.00	29306.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 17

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)	14543.88	39399.94
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	14543.88	39399.94
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5012.00	10056.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5012.00	10056.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

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

NAME OF COMMITTEE (In Full)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.	Full Name (Last, First, Middle Initial) James R Nolan		Date of Receipt	
	Mailing Address 14 Bay Tree Lane		M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 31504016
	Tequesta	FL	33469-2675	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		1001.00	
Name of Employer MEBA Vacation Trust		Occupation Licensed Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 1001.00		

B.	Full Name (Last, First, Middle Initial) Charles H. Lacour, Jr.		Date of Receipt	
	Mailing Address 10 Elayne Ct.		M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 31506738
	Smithtown	NY	11787	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		300.00	
Name of Employer MEBA Vacation Trust		Occupation Licensed Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 300.00		

C.	Full Name (Last, First, Middle Initial) Donald K Allen		Date of Receipt	
	Mailing Address 575 Phelps Court		M M / D D / Y Y Y Y 0 2 / 1 6 / 2 0 1 0	
	City	State	Zip Code	Transaction ID: 31506739
	Benicia	CA	94510-3841	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. C		400.00	
Name of Employer MEBA Vacation Trust		Occupation Licensed Marine Officer		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 400.00		

SUBTOTAL of Receipts This Page (optional)	▶	1701.00
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 7 / 17
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.	Full Name (Last, First, Middle Initial) Mike Dunklin		Date of Receipt MM / DD / YYYY 02 / 15 / 2010		
	Mailing Address 413 Lynch Drive		Transaction ID: 31506816		
	City Bullard	State TX	Zip Code 75757-5153	Amount of Each Receipt this Period 100.00	
	FEC ID number of contributing federal political committee. C				
	Name of Employer District No.1-PCD, MEBA	Occupation Union Official	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
300.00

B.	Full Name (Last, First, Middle Initial) Donald M. Keefe		Date of Receipt MM / DD / YYYY 02 / 15 / 2010		
	Mailing Address 10 Bemis Street		Transaction ID: 31506820		
	City Newtonville	State MA	Zip Code 02160-1103	Amount of Each Receipt this Period 85.01	
	FEC ID number of contributing federal political committee. C				
	Name of Employer District No.1-PCD,MEBA	Occupation Union Official	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
255.03

C.	Full Name (Last, First, Middle Initial) Bill K Van Loo		Date of Receipt MM / DD / YYYY 02 / 15 / 2010		
	Mailing Address 8293 Gannon Circle		Transaction ID: 31506827		
	City Easton	State MD	Zip Code 21601-7123	Amount of Each Receipt this Period 67.54	
	FEC ID number of contributing federal political committee. C				
	Name of Employer District No.1-PCD,MEBA	Occupation Secretary Treasurer	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Aggregate Year-to-Date ▼
202.62

SUBTOTAL of Receipts This Page (optional)	▶	252.55
TOTAL This Period (last page this line number only)	▶	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER:	PAGE 8 / 17
(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
<input type="checkbox"/> 13	<input type="checkbox"/> 14
<input type="checkbox"/> 15	<input type="checkbox"/> 16
<input type="checkbox"/> 17	

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

NAME OF COMMITTEE (In Full)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.	Full Name (Last, First, Middle Initial) Bruce J. Huntington		Date of Receipt
	Mailing Address 3047 N.W. 72nd Street		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Seattle	WA	98117-6266
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MEBA Vacation Trust		Occupation Licensed Marine Officer	Transaction ID: 31506932
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

B.	Full Name (Last, First, Middle Initial) GREGORY T SMITH		Date of Receipt
	Mailing Address 15642 Pt. Monroe Rd. NE		<input type="text" value="02"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Bainbridge Island	WA	98110-1116
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MEBA Vacation Trust		Occupation LICENSED MARINE OFFICER	Transaction ID: 31506933
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="250.00"/>	<input type="text" value="250.00"/>

C.	Full Name (Last, First, Middle Initial) DONALD RAFFANIELLO		Date of Receipt
	Mailing Address 86 Shore Road		<input type="text" value="02"/> / <input type="text" value="28"/> / <input type="text" value="2010"/>
	City	State	Zip Code
	Andover	NJ	07821-2239
	FEC ID number of contributing federal political committee.		<input type="text" value="C"/>
Name of Employer MEBA Vacation Trust		Occupation Licensed Marine officer	Transaction ID: 31506954
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Amount of Each Receipt this Period
		<input type="text" value="215.00"/>	<input type="text" value="30.00"/>

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="530.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 9 / 17
(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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A. Full Name (Last, First, Middle Initial)
MICHAEL B TRAFTON
Mailing Address 77 High Street
City Bath State ME Zip Code 04530-0000
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation Licensed Marine Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 403.72
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507081
Amount of Each Receipt this Period 351.56

B. Full Name (Last, First, Middle Initial)
STEPHEN SMITH
Mailing Address 380 Lafayette Rd., #11-262
City Seabrook State NH Zip Code 03874
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation Licensed Marine Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 320.15
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507089
Amount of Each Receipt this Period 141.03

C. Full Name (Last, First, Middle Initial)
THOMAS F BANDS
Mailing Address 815 Glen Allen Drive
City Baltimore State MD Zip Code 21229-1425
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation LICENSED MARINE OFFICER
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 280.00
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507104
Amount of Each Receipt this Period 280.00

SUBTOTAL of Receipts This Page (optional) ► 772.59
TOTAL This Period (last page this line number only) ►

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

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

FOR LINE NUMBER: PAGE 10 / 17
(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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A. Full Name (Last, First, Middle Initial)
JAMES F LACKEY
Mailing Address 1708 Turtle Point Drive
City De Soto State TX Zip Code 75115-2746
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation Licensed Marine Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 336.22
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507117
Amount of Each Receipt this Period 336.22

B. Full Name (Last, First, Middle Initial)
ANTHONY CARUBBA
Mailing Address 717 Milan Street
City New Orleans State LA Zip Code 70115-1454
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation Licensed Marine Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 208.60
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507123
Amount of Each Receipt this Period 208.60

C. Full Name (Last, First, Middle Initial)
JAMES LODGE
Mailing Address 10200 Snug Harbor Road
City Saint Petersburg State FL Zip Code 33702
FEC ID number of contributing federal political committee. **C**
Name of Employer MEBA Vacation Trust Occupation Licensed Marine Officer
Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 790.00
Date of Receipt 02 / 28 / 2010
Transaction ID: 31507128
Amount of Each Receipt this Period 120.00

SUBTOTAL of Receipts This Page (optional) ▶ 664.82
TOTAL This Period (last page this line number only) ▶

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 17
(check only one)

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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

<p>A. Full Name (Last, First, Middle Initial) THOMAS J. DEWHIRST</p> <p>Mailing Address 1205 Cedar Ave</p> <p>City State Zip Code Redlands CA 92373-6536</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MEBA Vacation Trust Licensed Marine Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 225.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2010</p> <p>Transaction ID: 31507138</p> <p>Amount of Each Receipt this Period 225.00</p>
--	---

<p>B. Full Name (Last, First, Middle Initial) Joseph D'Amico</p> <p>Mailing Address 444 North Capitol Street Suite 800</p> <p>City State Zip Code Washington DC 20001-1508</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MEBA Vacation Trust Licensed Marine Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 210.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2010</p> <p>Transaction ID: 31507159</p> <p>Amount of Each Receipt this Period 210.00</p>
--	---

<p>C. Full Name (Last, First, Middle Initial) RICHARD C ADAMS</p> <p>Mailing Address 143-66 226th Street</p> <p>City State Zip Code Laurelton NY 11413-3530</p> <p>FEC ID number of contributing federal political committee. C</p> <p>Name of Employer Occupation MEBA Vacation Trust Licensed Marine Officer</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ 235.00</p>	<p>Date of Receipt M M / D D / Y Y Y Y 02 / 28 / 2010</p> <p>Transaction ID: PR1189492623460</p> <p>Amount of Each Receipt this Period 15.00</p> <p>P/R Deduction (\$15.00 Monthly)</p>
---	--

SUBTOTAL of Receipts This Page (optional)	450.00
TOTAL This Period (last page this line number only)	4370.96

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 17	
	(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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.

Full Name (Last, First, Middle Initial) Wachovia		Date of Receipt
Mailing Address PO Box 563966		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
City	State	Zip Code
Charlotte	NC	28262-3966
FEC ID number of contributing federal political committee.		Transaction ID: 31506939
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="3.17"/>
Occupation		Bank Interest
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="896.94"/>	
<input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="3.17"/>
TOTAL This Period (last page this line number only)	<input type="text" value="3.17"/>

**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 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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.	Full Name (Last, First, Middle Initial) Sheila Jackson Lee for Congress	Transaction ID: 31269942 Date of Disbursement 02 / 01 / 2010
	Mailing Address 4412 ALMEDA	
	City HOUSTON State TX Zip Code 77004	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Sheila Jackson Lee Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TX District: 18	Contribution
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) Mike McMahon For Congress	Transaction ID: 31269961 Date of Disbursement 02 / 01 / 2010
	Mailing Address 66 Arnold Street	
	City Staten Island State NY Zip Code 10301	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Mr. Michael McMahon Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 13	Contribution
	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Lisa Murkowski For Us Senate	Transaction ID: 31269973 Date of Disbursement 02 / 01 / 2010
	Mailing Address PO Box 100847	
	City Anchorage State AK Zip Code 99510	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement Contribution Candidate Name Lisa Murkowski Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: AK District:	Contribution
	Disbursement For: 2010 <input checked="" 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)	

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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

<p>A. Full Name (Last, First, Middle Initial) Friends of Mazie Hirono</p> <p>Mailing Address P.O. Box 677</p> <p>City Honolulu State HI Zip Code 96809</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Mazie Hirono</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 02</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31378613 Date of Disbursement 02 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>B. Full Name (Last, First, Middle Initial) Bob Filner For Congress</p> <p>Mailing Address PO Box 121480</p> <p>City Chula Vista State CA Zip Code 91912</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Bob Filner</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31378618 Date of Disbursement 02 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>
<p>C. Full Name (Last, First, Middle Initial) Hoyer For Congress</p> <p>Mailing Address 607 14th Street, Nw Suite 800</p> <p>City Washington State DC Zip Code 20005</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name Rep. Steny H. Hoyer</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05</p> <p>Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: 31378620 Date of Disbursement 02 / 19 / 2010</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>Contribution</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 15 / 17

<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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A. Full Name (Last, First, Middle Initial) MESABI FUND <hr/> Mailing Address PO BOX 77693 <hr/> City WASHINGTON State DC Zip Code 20013 <hr/> Purpose of Disbursement Contribution 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: 31378626 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00 <hr/> Contribution
B. Full Name (Last, First, Middle Initial) Hanabusa 2010 <hr/> Mailing Address P.O. Box 1416 <hr/> City Honolulu State HI Zip Code 96806 <hr/> Purpose of Disbursement Contribution Candidate Name Colleen Hanabusa <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: HI District: 01 <hr/> Disbursement For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General2010	Transaction ID: 31379387 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 2 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00 <hr/> Contribution

SUBTOTAL of Disbursements This Page (optional) ►

3500.00

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

9500.00

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

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

FOR LINE NUMBER: (check only one)

PAGE 16 / 17

<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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A. Full Name (Last, First, Middle Initial) Tuesday Group PAC <hr/> Mailing Address PO Box 11586 <hr/> City Washington State DC Zip Code 20008 <hr/> Purpose of Disbursement 2010 Annual Contribution 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: 31269943 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00 <hr/> 2010 Annual Contribution
B. Full Name (Last, First, Middle Initial) Beth Kerttula Campaign <hr/> Mailing Address 10601 Horizon Drive <hr/> City Juneau State AK Zip Code 99801 <hr/> Purpose of Disbursement Debt Retirement Candidate Name BETH KERTTULA <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AK District: 00 <hr/> Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 31507160 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 7 / 2 0 1 0
	Amount of Each Disbursement this Period 250.00 <hr/> Debt Retirement

SUBTOTAL of Disbursements This Page (optional) ►

2750.00

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

2750.00

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

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 17

<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

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)
District No. 1-PCD, MEBA Political Fund (MEBA-PAF)

A.

Full Name (Last, First, Middle Initial)
MAI & Associates LLC

Transaction ID: 31269960

Date of Disbursement

Mailing Address Michael Ingrao
9610 Whitecedar Court

M	M	/	D	D	/	Y	Y	Y	Y
0	2		0	1		2	0	1	0

City Vienna State VA Zip Code 22181

Amount of Each Disbursement this Period

5000.00

Purpose of Disbursement
Professional services retainer, February 2010

001
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

Professional services retainer, February 2010

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5000.00

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

5000.00
