

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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

ADDRESS (number and street)

1775 K STREET N.W.

Check if different than previously reported. (ACC)

Washington

DC

20006

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00002766

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

X

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), Mar 20 (M3), Apr 20 (M4), May 20 (M5), Jun 20 (M6), Jul 20 (M7), Aug 20 (M8), Sep 20 (M9), Oct 20 (M10), Nov 20 (M11), Dec 20 (M12), 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 03 01 2010 through 03 31 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 Anthony M. Perrone

Signature of Treasurer Electronically Filed by Anthony M. Perrone

Date 04 20 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.

Table with 7 columns and 1 row for Office Use Only.

FEC FORM 3X (Rev. 12/2004)

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

Write or Type Committee Name

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

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		2399026.46
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	2735364.75									
(c) Total Receipts (from Line 19) .....	470913.46	958055.03								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	3206278.21	3357081.49								
7. Total Disbursements (from Line 31) .....	321010.93	471814.21								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	2885267.28	2885267.28								
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 FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

Report Covering the Period: From: 

M	M
0	3

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
0	3

D	D
3	1

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) .....	8548.88	8848.88
(ii) Unitemized .....	446082.22	931755.60
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	454631.10	940604.48
(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) .....	454631.10	940604.48
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 .....	15500.00	15500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	782.36	1950.55
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)) .....	470913.46	958055.03
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	470913.46	958055.03

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	0.00	2178.28
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	2178.28
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	196800.00	293200.00
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.....	124210.93	176435.93
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))..	321010.93	471814.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	321010.93	471814.21

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3) .....	454631.10	940604.48
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	454631.10	940604.48
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	2178.28
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	0.00	2178.28

**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 / 47
	<input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input checked="" type="checkbox"/> 16 <input type="checkbox"/> 17	

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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) TIM BISHOP FOR CONGRESS		Date of Receipt
	Mailing Address 6 EAST STREET, SE		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 05 / 2010
	City	State	Zip Code
	WASHINGTON	DC	20003
	FEC ID number of contributing federal political committee. <b>C</b> C00375618		Transaction ID: 8993871
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 2500.00
		<input type="text"/> 2500.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD		Date of Receipt
	Mailing Address POST OFFICE BOX 270701		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2010
	City	State	Zip Code
	WEST HARTFORD	CT	06127
	FEC ID number of contributing federal political committee. <b>C</b> C00091017		Transaction ID: 9015373
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) ▼ Special-General20-10		Aggregate Year-to-Date ▼	<input type="text"/> 3000.00
		<input type="text"/> 3000.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS DODD		Date of Receipt
	Mailing Address POST OFFICE BOX 270701		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 16 / 2010
	City	State	Zip Code
	WEST HARTFORD	CT	06127
	FEC ID number of contributing federal political committee. <b>C</b> C00091017		Transaction ID: 9015375
Name of Employer		Occupation	Amount of Each Receipt this Period
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 5000.00
		<input type="text"/> 8000.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 10500.00
<b>TOTAL</b> 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 7 / 47	
	(check only one)	
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input checked="" type="checkbox"/> 15
		<input checked="" 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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

<b>A.</b>	Full Name (Last, First, Middle Initial) ELLSWORTH FOR CONGRESS		Date of Receipt																					
	Mailing Address POST OFFICE BOX 62		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	3		3	0		2	0	1	0														
	City State Zip Code EVANSVILLE IN 47708		<b>Transaction ID: 9043938</b>																					
	FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 5000.00																					
Name of Employer Occupation																								
Receipt For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 5000.00																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	5000.00
<b>TOTAL</b> This Period (last page this line number only) .....	15500.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 47  
(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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial)  
DEANA E ABONDOLO

Mailing Address 24 FAIRLAWN AVENUE

City Staten Island State NY Zip Code 10308

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

Name of Employer UFCW LOCAL AF342 Occupation L/U Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 15 / 2010  
**Transaction ID: 9014916**  
Amount of Each Receipt this Period: 300.00

**B.**

Full Name (Last, First, Middle Initial)  
NICKOLAS ABONDOLO

Mailing Address 38 BOLIVAR STREET

City Staten Island State NY Zip Code 10314-5604

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

Name of Employer UFCW LOCAL AF342 Occupation L/U Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 15 / 2010  
**Transaction ID: 9014917**  
Amount of Each Receipt this Period: 300.00

**C.**

Full Name (Last, First, Middle Initial)  
RICHARD ABONDOLO

Mailing Address 18 GENOLA AVENUE

City Sea Cliff State NY Zip Code 11579-2112

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

Name of Employer UFCW Local No. 342 Occupation L/U Representative

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 03 / 15 / 2010  
**Transaction ID: 9014918**  
Amount of Each Receipt this Period: 300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 / 47
	<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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) STEPHEN T BOORAS	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 183 ANNADALE ROAD	<b>Transaction ID:</b> 9014919
	City State Zip Code STATEN ISLAND NY 10312-1537	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) RAFAEL CASTILLO	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 1640 STEPHEN STREET FIRST FLOOR	<b>Transaction ID:</b> 9014920
	City State Zip Code RIDGEWOOD NY 11385-5346	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) ANWAR M COLINDRES	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 941 LEGGETT AVENUE APARTMENT 3B	<b>Transaction ID:</b> 9014921
	City State Zip Code BRONX NY 10455-5121	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	900.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 47  
(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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.** Full Name (Last, First, Middle Initial)  
**ANDREW A DEANGELIS**

Mailing Address **162 LAMOKA AVENUE**

City **STATEN ISLAND** State **NY** Zip Code **10308-2234**

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

Name of Employer **UFCW Local No. 342** Occupation **L/U Representative**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 15 / 2010**  
**Transaction ID: 9014922**  
 Amount of Each Receipt this Period **300.00**

**B.** Full Name (Last, First, Middle Initial)  
**SANDRA L DIAZ**

Mailing Address **2558 PIT KIN AVENUE  
SECOND FLOOR FRONT**

City **BROOKLYN** State **NY** Zip Code **11208-2422**

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

Name of Employer **UFCW Local No. 342** Occupation **L/U Representative**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 15 / 2010**  
**Transaction ID: 9014923**  
 Amount of Each Receipt this Period **300.00**

**C.** Full Name (Last, First, Middle Initial)  
**MAURA DUCI**

Mailing Address **49 MCCUE LANE**

City **BABYLON** State **NY** Zip Code **11702-3001**

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

Name of Employer **UFCW LOCAL AF342** Occupation **L/U Representative**

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **300.00**

Date of Receipt **03 / 15 / 2010**  
**Transaction ID: 9014924**  
 Amount of Each Receipt this Period **300.00**

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 47  
(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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial)  
KELLY A EGAN

Mailing Address 76 EUNICE PLACE

City State Zip Code  
STATEN ISLAND NY 10303-2106

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014925**

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
JOHN B FERETTI

Mailing Address 3 SPRINGS LAKE DRIVE

City State Zip Code  
WHITE PLAINS NY 10604-2850

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014926**

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
BRIAN J GABEL

Mailing Address 102 FIRESTONE CT

City State Zip Code  
SUMMERVILLE SC 29483-5186

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014927**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 12 / 47  
(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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.** Full Name (Last, First, Middle Initial)  
PETER J IACONO

Mailing Address 1826 WEST 5TH STREET

City State Zip Code  
BROOKLYN NY 11223-2638

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014928**

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
ROBERT R LAZZARO

Mailing Address 751 BERMUDA ROAD

City State Zip Code  
WEST BABYLON NY 11704-7426

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014929**

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL LINANE

Mailing Address 56 ILYSSA WAY

City State Zip Code  
STATEN ISLAND NY 10312-1359

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014930**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **900.00**

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

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 13 / 47
	<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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) BRANDI L IACONO		Date of Receipt
	Mailing Address 379 MAIN STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	STATEN ISLAND	NY	10307-1725
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 9014931
Name of Employer UFCW LOCAL AF342		Occupation L/U Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

<b>B.</b>	Full Name (Last, First, Middle Initial) LOUIS LOIACONO		Date of Receipt
	Mailing Address 379 MAIN STREET		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	STATEN ISLAND	NY	10307-1725
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 9014932
Name of Employer UFCW Local No. 342		Occupation L/U Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

<b>C.</b>	Full Name (Last, First, Middle Initial) JOSE A LOPEZ		Date of Receipt
	Mailing Address 140 DEBS PLACE, APT. 17B		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 03 / 15 / 2010
	City	State	Zip Code
	BRONX	NY	10475-2552
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> 9014933
Name of Employer UFCW LOCAL AF342		Occupation L/U Representative	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 300.00

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 900.00
<b>TOTAL</b> 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: (check only one)	PAGE 14 / 47
	<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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL N MARENO	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 179 CARLYLE GREEN	<b>Transaction ID:</b> 9014934
	City State Zip Code STATEN ISLAND NY 10312-1719	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) CAROLINA MARTINEZ	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 1375 GRAND CONCOURSE APARTMENT 2B	<b>Transaction ID:</b> 9014935
	City State Zip Code BRONX NY 10452-6722	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) LISA E O'LEARY	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 497-2 WILLOW ROAD E	<b>Transaction ID:</b> 9014936
	City State Zip Code STATEN ISLAND NY 10314	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>900.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 47  
(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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.**

Full Name (Last, First, Middle Initial)  
JOHN J PIERMAN

Mailing Address 35 CHESTNUT LANE

City State Zip Code  
LEVITTOWN NY 11756-4016

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014937**

Amount of Each Receipt this Period  
300.00

**B.**

Full Name (Last, First, Middle Initial)  
ELIZABETH ALVAREZ

Mailing Address 357 45TH STREET

City State Zip Code  
BROOKLYN NY 11220-1107

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014938**

Amount of Each Receipt this Period  
300.00

**C.**

Full Name (Last, First, Middle Initial)  
DONALD PRONIEWYCH

Mailing Address 177 MAPLE STREET

City State Zip Code  
MEDFORD NY 11763-4009

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

Name of Employer Occupation  
UFCW LOCAL AF342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID: 9014939**

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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

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

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

FOR LINE NUMBER: PAGE 16 / 47  
(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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A.** Full Name (Last, First, Middle Initial)  
DAVID RODRIGUEZ

Mailing Address 58 WALNUT LANE

City State Zip Code  
MIDDLETOWN NY 10940-6801

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID:** 9014940

Amount of Each Receipt this Period  
300.00

**B.** Full Name (Last, First, Middle Initial)  
FRED E STEINIGER

Mailing Address 22 STRAWBERRY LANE

City State Zip Code  
STATEN ISLAND NY 10312-6411

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID:** 9014941

Amount of Each Receipt this Period  
300.00

**C.** Full Name (Last, First, Middle Initial)  
IRA D WINCOTT

Mailing Address 8 GILBERT LANE

City State Zip Code  
PLAINVIEW NY 11803-3105

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

Name of Employer Occupation  
UFCW Local No. 342 L/U Representative

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt  
MM / DD / YYYY  
03 / 15 / 2010

**Transaction ID:** 9014942

Amount of Each Receipt this Period  
300.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶ **900.00**

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



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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 47
	<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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

<b>A.</b>	Full Name (Last, First, Middle Initial) DAVID T YOUNG	Date of Receipt MM / DD / YYYY 03 / 15 / 2010
	Mailing Address 497-2 WILLOW ROAD EAST	<b>Transaction ID:</b> 9014943
	City State Zip Code STATEN ISLAND NY 10314	Amount of Each Receipt this Period 300.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 342 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 300.00	

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN P BOWEN	Date of Receipt MM / DD / YYYY 03 / 31 / 2010
	Mailing Address 6880 PIERCE STREET	<b>Transaction ID:</b> 9044857
	City State Zip Code ARVADA CO 80003-3644	Amount of Each Receipt this Period 73.88
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 7R L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 221.64	

<b>C.</b>	Full Name (Last, First, Middle Initial) DAVID P FLEMING	Date of Receipt MM / DD / YYYY 03 / 30 / 2010
	Mailing Address 61 WOODWORTH LANE	<b>Transaction ID:</b> 9046465
	City State Zip Code SCITUATE MA 02066-4438	Amount of Each Receipt this Period 75.00
	FEC ID number of contributing federal political committee. <b>C</b>	
	Name of Employer Occupation UFCW Local No. 328 L/U Representative	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>448.88</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>8548.88</b>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 18 / 47  
(check only one)

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

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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)  
CHEVY CHASE BANK

Mailing Address 6151 CHEVY CHASE DRIVE

City State Zip Code  
LAUREL MD 20707

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1950.55

Date of Receipt  
M M / D D / Y Y Y Y  
03 / 31 / 2010

Transaction ID: 9057098

Amount of Each Receipt this Period  
782.36

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	782.36
<b>TOTAL</b> This Period (last page this line number only) .....	▶	782.36

# 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 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)  
**UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB**

**A.** Full Name (Last, First, Middle Initial)  
**FRIENDS OF TAHESHA WAY**

Mailing Address **29 SENSET TERRACE**

City **WAYNE** State **NJ** Zip Code **07470**

Purpose of Disbursement  
**TAHESHA WAY, Freeholder NJ**

Candidate Name  
**TAHESHA WAY**

Office Sought:  House  Senate  President  
 Disbursement For: 2009  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 8977068**  
 Date of Disbursement  
 03 / 01 / 2010

Amount of Each Disbursement this Period  
 -1500.00

**TAHESHA WAY, Freeholder NJ**

**B.** Full Name (Last, First, Middle Initial)  
**STRICKLAND FOR GOVERNOR**

Mailing Address **340 EAST FULTON STREET**

City **COLUMBUS** State **OH** Zip Code **43215**

Purpose of Disbursement  
**TED STRICKLAND, GOVERNOR OH**

Candidate Name  
**TED STRICKLAND**

Office Sought:  House  Senate  President  
 Disbursement For: 2010  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 8977102**  
 Date of Disbursement  
 03 / 01 / 2010

Amount of Each Disbursement this Period  
 -2000.00

**TED STRICKLAND, GOVERNOR OH**

**C.** Full Name (Last, First, Middle Initial)  
**UFCW LOCAL NO. 1445**

Mailing Address **30 STERGIS WAY**

City **DEDHAM** State **MA** Zip Code **02026**

Purpose of Disbursement  
**Refund of money that was deposited in error**

Candidate Name

Office Sought:  House  Senate  President  
 Disbursement For:  Primary  General  Other (specify) ▼

State: District:

**Transaction ID: 8977334**  
 Date of Disbursement  
 03 / 01 / 2010

Amount of Each Disbursement this Period  
 4040.00

**Refund of money that was deposited in error**

**SUBTOTAL** of Disbursements This Page (optional) ..... ▶ **540.00**

**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 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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) BILL WHITE FOR TEXAS	Transaction ID: 8977350 Date of Disbursement 03 / 01 / 2010
	Mailing Address 2100 WEST LOOP SOUTH SUITE 700	Amount of Each Disbursement this Period 50000.00
	City HOUSTON State TX Zip Code 77027	
	Purpose of Disbursement BILL WHITE, GOVERNOR TX	011 Category/ Type
	Candidate Name BILL WHITE	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	BILL WHITE, GOVERNOR TX
	State: District:	

B.	Full Name (Last, First, Middle Initial) ALLEGHENY COUNTY LABOR COUNCIL WORKING FAMILIES	Transaction ID: 8993856 Date of Disbursement 03 / 05 / 2010
	Mailing Address 401 WOOD STREET, SUITE 501	Amount of Each Disbursement this Period 500.00
	City PITTSBURGH State PA Zip Code 15222	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) WAPELLO COUNTY DEMOCRATS	Transaction ID: 9000634 Date of Disbursement 03 / 09 / 2010
	Mailing Address 2704 KENWOOD DRIVE	Amount of Each Disbursement this Period 2000.00
	City OTTUMWA State IA Zip Code 52501	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	52500.00
<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 21 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC PARTY OF GEORGIA</b>	<b>Transaction ID:</b> 9000636 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 9 / 2 0 1 0	
	Mailing Address 1100 SPRING STREET SUITE 408		Amount of Each Disbursement this Period 5000.00
	City ATLANTA State GA Zip Code 30309		
	Purpose of Disbursement Candidate Name	011 Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>LINDA CHAVEZ-THOMPSON FOR LT. GOVERNOR</b>	<b>Transaction ID:</b> 9010572 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 1 0	
	Mailing Address POST OFFICE BOX 6719		Amount of Each Disbursement this Period 10000.00
	City SAN ANTONIO State TX Zip Code 78209		
	Purpose of Disbursement LINDA CHAVEZ-THOMPSON, LT. GOVERNOR TX Candidate Name LINDA CHAVEZ-THOMPSON	011 Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	LINDA CHAVEZ-THOMPSON, LT. GOVERNOR TX
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DAVID FIELDING</b>	<b>Transaction ID:</b> 9032755 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 7 / 2 0 1 0	
	Mailing Address 909 SOUTH VINE		Amount of Each Disbursement this Period 250.00
	City MAGNOLIA State AR Zip Code 71753		
	Purpose of Disbursement DAVID FIELDING, STATE HOUSE 5th AR Candidate Name DAVID FIELDING	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AR District: 05	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	DAVID FIELDING, STATE HOU- SE 5th AR

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

15250.00

**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 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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) DAVIS COUNTY DEMOCRATS	Transaction ID: 9032758 Date of Disbursement
	Mailing Address 16252 WHEAT AVENUE	<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City FLORIS State IA Zip Code 52560-8764	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMOCRATIC PARTY OF VIRGINIA	Transaction ID: 9032759 Date of Disbursement
	Mailing Address 1710 EAST FRANKLIN STREET 2ND FLOOR	<input type="text" value="03"/> / <input type="text" value="17"/> / <input type="text" value="2010"/>
	City RICHMOND State VA Zip Code 23223	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="10000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) VOCUS, INC.	Transaction ID: 9038386 Date of Disbursement
	Mailing Address 4296 FORBES BOULEVARD	<input type="text" value="03"/> / <input type="text" value="24"/> / <input type="text" value="2010"/>
	City LANHAM State MD Zip Code 20706	Amount of Each Disbursement this Period
	Purpose of Disbursement HALF OF 1 YEAR CONTRACT AMOUNT FOR PAC SOFTWARE (OTHER HALF TO BE PAID BY GF - US)	<input type="text" value="31870.93"/>
	Candidate Name	<input type="text" value="009"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="42870.93"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) COOK FOR HOUSE COMMITTEE <hr/> Mailing Address RT. 6, BOX 83-A <hr/> City MORGANTOWN State WV Zip Code 26505 <hr/> Purpose of Disbursement STEPHEN COOK, STATE HOUSE WV Candidate Name STEPHEN COOK <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: WV District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9038855 Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2010
	Amount of Each Disbursement this Period 1000.00
	Category/Type 011
	STEPHEN COOK, STATE HOUSE WV
<b>B.</b> Full Name (Last, First, Middle Initial) THOMAS 2010 <hr/> Mailing Address 1330 GERANIUM STREET NW <hr/> City WASHINGTON State DC Zip Code 20012 <hr/> Purpose of Disbursement HARRY THOMAS, COUNCIL WARD DC Candidate Name HARRY THOMAS <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9038856 Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2010
	Amount of Each Disbursement this Period 500.00
	Category/Type 011
	HARRY THOMAS, COUNCIL WARD DC
<b>C.</b> Full Name (Last, First, Middle Initial) COMMONWEALTH VICTORY FUND <hr/> Mailing Address 1710 E. FRANKLIN STREET SECOND FLOOR <hr/> City RICHMOND State VA Zip Code 23228 <hr/> Purpose of Disbursement Candidate Name <hr/> 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) ▼	Transaction ID: 9038872 Date of Disbursement M M / D D / Y Y Y Y 03 / 25 / 2010
	Amount of Each Disbursement this Period 10000.00
	Category/Type 011
	(Empty)

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

11500.00

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

(Empty)

**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 24 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) VOCUS, INC. <hr/> Mailing Address 4296 FORBES BOULEVARD <hr/> City LANHAM State MD Zip Code 20706 <hr/> Purpose of Disbursement P0578216 Candidate Name	Transaction ID: 9039219 Date of Disbursement 03 / 25 / 2010
	Amount of Each Disbursement this Period -31870.93
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	P0578216
<b>B.</b> Full Name (Last, First, Middle Initial) VOCUS, INC. <hr/> Mailing Address 4296 FORBES BOULEVARD <hr/> City LANHAM State MD Zip Code 20706 <hr/> Purpose of Disbursement HALF OF 1 YEAR CONTRACT AMOUNT FOR PAC SOFTWARE (OTHER HALF TO BE PAID BY GF - US) Candidate Name	Transaction ID: 9039220 Date of Disbursement 03 / 25 / 2010
	Amount of Each Disbursement this Period 31870.93
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	HALF OF 1 YEAR CONTRACT AMOUNT FOR PAC SOFTWARE (OTHER HALF TO BE PAID BY GF - US)
<b>C.</b> Full Name (Last, First, Middle Initial) STATE OF WISCONSIN/GOVERNMENT ACCOUNTABILITY BOARD <hr/> Mailing Address 212 EAST WASHINGTON AVENUE, 3RD FL POST OFFICE BOX 7984 <hr/> City MADISON State WI Zip Code 53707-7984 <hr/> Purpose of Disbursement Candidate Name	Transaction ID: 9039363 Date of Disbursement 03 / 25 / 2010
	Amount of Each Disbursement this Period 300.00
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	Category/Type 001
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	

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

300.00

**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 25 / 47

<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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT FRANK DERMODY	Transaction ID: 9040223 Date of Disbursement
	Mailing Address POST OFFICE BOX 274	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City TARENTUM State PA Zip Code 15084	Amount of Each Disbursement this Period
	Purpose of Disbursement FRANK DERMODY, STATE HOUSE 33rd PA	<input type="text" value="250.00"/>
	Candidate Name FRANK DERMODY	<input type="text" value="011"/> Category/ Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 33	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		FRANK DERMODY, STATE HOUSE 33rd PA

B.	Full Name (Last, First, Middle Initial) ALLEGHENY COUNTY DEMOCRATIC COMMITTEE	Transaction ID: 9040227 Date of Disbursement
	Mailing Address 224 ROSS STREET	<input type="text" value="03"/> / <input type="text" value="26"/> / <input type="text" value="2010"/>
	City PITTSBURGH State PA Zip Code 15219	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="750.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="123710.93"/>

# 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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>TIM BISHOP FOR CONGRESS</b>	<b>Transaction ID:</b> 8977337 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0	
	Mailing Address <b>6 EAST STREET, SE</b>		
	City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Amount of Each Disbursement this Period <b>1500.00</b>	
	Purpose of Disbursement	<b>011</b>	Category/Type
	Candidate Name <b>TIM BISHOP</b>		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: <b>NY</b> District: <b>01</b>		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>LONE STAR FUND</b>	<b>Transaction ID:</b> 8977338 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0	
	Mailing Address <b>6 E STREET, SE</b>		
	City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Amount of Each Disbursement this Period <b>5000.00</b>	
	Purpose of Disbursement	<b>011</b>	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>RUBEN HINOJOSA FOR CONGRESS</b>	<b>Transaction ID:</b> 8977342 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 1 / 2 0 1 0	
	Mailing Address <b>417 NEW JERSEY AVENUE SE</b>		
	City <b>WASHINGTON</b> State <b>DC</b> Zip Code <b>20003</b>	Amount of Each Disbursement this Period <b>2500.00</b>	
	Purpose of Disbursement	<b>011</b>	Category/Type
	Candidate Name <b>RUBEN HINOJOSA</b>		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: <b>TX</b> District: <b>15</b>		

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

**9000.00**

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>CHET EDWARDS FOR CONGRESS</b>	<b>Transaction ID:</b> 8977343 Date of Disbursement 03 / 01 / 2010	
	Mailing Address POST OFFICE BOX 23273		
	City WACO	State TX	Zip Code 76702
	Purpose of Disbursement	Amount of Each Disbursement this Period 2500.00	
	Candidate Name CHET EDWARDS	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TX District: 17		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>CUELLAR FOR CONGRESS</b>	<b>Transaction ID:</b> 8977344 Date of Disbursement 03 / 01 / 2010	
	Mailing Address 1519 WASHINGTON STREET SUITE 200		
	City LAREDO	State TX	Zip Code 78040
	Purpose of Disbursement	Amount of Each Disbursement this Period 2500.00	
	Candidate Name HENRY CUELLAR	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TX District: 28		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DOGGETT FOR CONGRESS</b>	<b>Transaction ID:</b> 8977345 Date of Disbursement 03 / 01 / 2010	
	Mailing Address POST OFFICE BOX 5843		
	City AUSTIN	State TX	Zip Code 78763
	Purpose of Disbursement	Amount of Each Disbursement this Period 2000.00	
	Candidate Name LLOYD DOGGETT	011 Category/ Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: TX District: 25		

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

7000.00

**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 28 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)  
CIRO D. RODRIGUEZ FOR CONGRESS

Transaction ID: 8977347

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	0

Mailing Address 236 MASSACHUSETTS AVE, NE  
SUITE 508

Amount of Each Disbursement this Period

5000.00
---------

City WASHINGTON State DC Zip Code 20002

Purpose of Disbursement

011
Category/ Type

Candidate Name  
CIRO D RODRIGUEZ

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 23

B.

Full Name (Last, First, Middle Initial)  
SHEILA JACKSON LEE FOR CONGRESS

Transaction ID: 8977348

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	0

Mailing Address 4412 ALMEDA ROAD

Amount of Each Disbursement this Period

2000.00
---------

City HOUSTON State TX Zip Code 77004

Purpose of Disbursement

011
Category/ Type

Candidate Name  
SHEILA JACKSON-LEE

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 18

C.

Full Name (Last, First, Middle Initial)  
AL GREEN FOR CONGRESS

Transaction ID: 8977349

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	1		2	0	1	0

Mailing Address 3003 SOUTH LOOP WEST  
SUITE 321

Amount of Each Disbursement this Period

5000.00
---------

City HOUSTON State TX Zip Code 77054

Purpose of Disbursement

011
Category/ Type

Candidate Name  
AL GREEN

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TX District: 09

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

12000.00
----------

**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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) TIERNEY FOR CONGRESS	Transaction ID: 9000632 Date of Disbursement
	Mailing Address 49 FEDERAL STREET	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City SALEM State MA Zip Code 01970	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="500.00"/>
	Candidate Name JOHN TIERNEY	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 06	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BRAD MILLER CONGRESSIONAL CAMP	Transaction ID: 9000633 Date of Disbursement
	Mailing Address 499 SOUTH CAPITOL STREET, SW SUITE 604	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="5000.00"/>
	Candidate Name BRAD MILLER	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NC District: 13	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) JOHN BOCCIERI FOR CONGRESS	Transaction ID: 9000637 Date of Disbursement
	Mailing Address POST OFFICE BOX 3016	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City ALLIANCE State OH Zip Code 44601	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="2500.00"/>
	Candidate Name JOHN BOCCIERI	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 16	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="8000.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

**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 30 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) BETTY SUTTON FOR CONGRESS</p> <p>Mailing Address 1700 WEST MARKET STREET #155</p> <p>City AKRON State OH Zip Code 44313</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name BETTY SUTTON</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 13</p>	<p><b>Transaction ID:</b> 9000638 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">09</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">5000.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CONNECTICUT WORKING FAMILIES FEDERAL PAC</p> <p>Mailing Address 30 ARBOR STREET</p> <p>City HARTFORD State CT Zip Code 06106</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 9001062 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">10</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">1000.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SEARCHLIGHT LEADERSHIP FUND</p> <p>Mailing Address 426 C STREET, NE REAR BUILDING</p> <p>City WASHINGTON State DC Zip Code 20002</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/ Type</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> 9010459 <b>Date of Disbursement</b> <span style="border: 1px solid black; padding: 2px;">03</span> / <span style="border: 1px solid black; padding: 2px;">11</span> / <span style="border: 1px solid black; padding: 2px;">2010</span></p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 2px; display: block; text-align: center;">5000.00</span></p>

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

**11000.00**

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

Full Name (Last, First, Middle Initial)  
PAULA BROOKS FOR CONGRESS

Mailing Address 222 E 11TH AVENUE

City COLUMBUS State OH Zip Code 43201

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
PAULA BROOKS

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 12

Transaction ID: 9013604  
Date of Disbursement

03 / 15 / 2010

Amount of Each Disbursement this Period

2500.00

B.

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

Mailing Address 929 HARRISON AVENUE  
SUITE 305

City COLUMBUS State OH Zip Code 43215

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
MARY JO KILROY

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: OH District: 15

Transaction ID: 9013605  
Date of Disbursement

03 / 15 / 2010

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)  
COOPER FOR CONGRESS COMM

Mailing Address 601 WOODLAND STREET  
POST OFFICE BOX 60750

City NASHVILLE State TN Zip Code 37206

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
JAMES H COOPER

Office Sought:  House  
 Senate  
 President

Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

State: TN District: 05

Transaction ID: 9013761  
Date of Disbursement

03 / 15 / 2010

Amount of Each Disbursement this Period

1000.00

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

6000.00

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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF PHIL HARE</p> <p>Mailing Address POST OFFICE BOX 4183 3805 44TH STREET</p> <p>City ROCK ISLAND State IL Zip Code 61204</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name PHIL HARE</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: IL District: 17</p>	<p><b>Transaction ID:</b> 9013762 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
<p><b>B.</b> Full Name (Last, First, Middle Initial) LINCOLN DAVIS FOR CONGRESS</p> <p>Mailing Address 629 NORTH MAIN STREET</p> <p>City JAMESTOWN State TN Zip Code 38556</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name LINCOLN DAVIS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: TN District: 04</p>	<p><b>Transaction ID:</b> 9013763 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">500.00</div> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
<p><b>C.</b> Full Name (Last, First, Middle Initial) MIKULSKI FOR SENATE COMMITTEE</p> <p>Mailing Address POST OFFICE BOX 13147</p> <p>City BALTIMORE State MD Zip Code 21203</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name BARBARA MIKULSKI</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: MD District:</p>	<p><b>Transaction ID:</b> 9013764 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <div style="border: 1px solid black; padding: 5px; text-align: center;">2500.00</div> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												

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

**5500.00**

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



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 33 / 47

<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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CAROLYN MCCARTHY	Transaction ID: 9013765 Date of Disbursement																			
	Mailing Address POST OFFICE BOX 190	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
	City MINELOA State NY Zip Code 11501	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>2500.00</td></tr></table>	2500.00																		
2500.00																					
	Candidate Name CAROLYN MCCARTHY	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 04	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) JOHN HALL FOR CONGRESS	Transaction ID: 9013766 Date of Disbursement																			
	Mailing Address 499 S. CAPITOL STREET, SW SUITE 404	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
	City WASHINGTON State DC Zip Code 20003	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name JOHN HALL	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 19	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) FRIENDS OF CHUCK SCHUMER	Transaction ID: 9013767 Date of Disbursement																			
	Mailing Address 60 MADISON AVENUE, SUITE 1026	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	5		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	5		2	0	1	0												
	City NEW YORK State NY Zip Code 10010	Amount of Each Disbursement this Period																			
	Purpose of Disbursement	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name CHARLES E SCHUMER	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: NY District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>4500.00</td></tr></table>	4500.00
4500.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 34 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) <b>CLARKE FOR CONGRESS</b>	<b>Transaction ID:</b> 9013768
	Mailing Address <b>504 FLATBUSH AVENUE</b>	Date of Disbursement 03 / 15 / 2010
	City <b>BROOKLYN</b> State <b>NY</b> Zip Code <b>11225</b>	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name <b>YVETTE CLARKE</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>NY</b> District: <b>11</b>	

B.	Full Name (Last, First, Middle Initial) <b>TRENT VAN HAAFTEN</b>	<b>Transaction ID:</b> 9032756
	Mailing Address <b>200 WEST WASHINGTON STREET</b>	Date of Disbursement 03 / 17 / 2010
	City <b>INDIANAPOLIS</b> State <b>IN</b> Zip Code <b>46241</b>	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name <b>TRENT VAN HAAFTEN</b>	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: <b>IN</b> District: <b>08</b>	

C.	Full Name (Last, First, Middle Initial) <b>CONNECTICUT WORKING FAMILIES FEDERAL PAC</b>	<b>Transaction ID:</b> 9038255
	Mailing Address <b>30 ARBOR STREET</b>	Date of Disbursement 03 / 24 / 2010
	City <b>HARTFORD</b> State <b>CT</b> Zip Code <b>06106</b>	Amount of Each Disbursement this Period -1000.00
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

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

5000.00

**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 35 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>THE CICILLINE COMMITTEE</b>	<b>Transaction ID:</b> 9038857
	Mailing Address 102 WATERMAN STREET SUITE 2	Date of Disbursement MM / DD / YYYY 03 / 25 / 2010
	City PROVIDENCE	State RI
	Zip Code 02906	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	011 Category/ Type
Candidate Name DAVID CICILLINE	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: RI	District: 00	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>MICHAUD FOR CONGRESS</b>	<b>Transaction ID:</b> 9038858
	Mailing Address 213 LISBON STREET	Date of Disbursement MM / DD / YYYY 03 / 25 / 2010
	City LEWISTON	State ME
	Zip Code 04240	Amount of Each Disbursement this Period 2500.00
	Purpose of Disbursement	011 Category/ Type
Candidate Name MICHAEL MICHAUD	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: ME	District: 02	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>FRIENDS FOR JIM MCDERMOTT</b>	<b>Transaction ID:</b> 9038860
	Mailing Address POST OFFICE BOX 21786 MAIN STATION	Date of Disbursement MM / DD / YYYY 03 / 25 / 2010
	City SEATTLE	State WA
	Zip Code 98111	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement	011 Category/ Type
Candidate Name JIM MCDERMOTT	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
State: WA	District: 07	

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

6000.00

**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 36 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b> Full Name (Last, First, Middle Initial) BILL OWENS FOR CONGRESS <hr/> Mailing Address POST OFFICE BOX 1575 <hr/> City PLATTSBURGH State NY Zip Code 12901 Purpose of Disbursement <hr/> Candidate Name BILL OWENS <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 00 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9038861 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type 011
<b>B.</b> Full Name (Last, First, Middle Initial) FRIENDS OF DAN MAFFEI <hr/> Mailing Address POST OFFICE BOX 74 <hr/> City SYRACUSE State NY Zip Code 13214 Purpose of Disbursement <hr/> Candidate Name DAN MAFFEI <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 25 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: 9038862 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 2500.00 Category/Type 011
<b>C.</b> Full Name (Last, First, Middle Initial) LEADERSHIP FOR TODAY AND TOMORROW (PAC) <hr/> Mailing Address 607 - 14TH STREET, #800 <hr/> City WASHINGTON State DC Zip Code 20005 Purpose of Disbursement <hr/> Candidate Name LEADERSHIP FOR TODAY AND TOMORROW (PAC) <hr/> 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) ▼	Transaction ID: 9038865 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 5 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00 Category/Type 011

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

12500.00

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) CITIZENS FOR RUSH</p> <p>Mailing Address POST OFFICE BOX 7292</p> <p>City CHICAGO State IL Zip Code 60680</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name BOBBY L RUSH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: IL District: 01</p>	<p><b>Transaction ID:</b> 9038866 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">1500.00</span></p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) JOHN BOCCIERI FOR CONGRESS</p> <p>Mailing Address POST OFFICE BOX 3016</p> <p>City ALLIANCE State OH Zip Code 44601</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name JOHN BOCCIERI</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: OH District: 16</p>	<p><b>Transaction ID:</b> 9038868 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">2500.00</span></p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) BILL LYNCH FOR CONGRESS</p> <p>Mailing Address 247 ROOSEVELT AVENUE</p> <p>City PAWTUCKET State RI Zip Code 02860</p> <p>Purpose of Disbursement <span style="border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name BILL LYNCH</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: RI District: 00</p>	<p><b>Transaction ID:</b> 9038870 <b>Date of Disbursement:</b> 03 / 25 / 2010</p> <p>Amount of Each Disbursement this Period <span style="border: 1px solid black; padding: 5px; display: block; text-align: center;">5000.00</span></p>

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

9000.00

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

**A. COMMITTEE FOR A DEMOCRATIC FUTURE**

Full Name (Last, First, Middle Initial)

Mailing Address POST OFFICE BOX 18079

City WASHINGTON State DC Zip Code 20036

Purpose of Disbursement

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Transaction ID: 9038871

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**B. TIERNEY FOR CONGRESS**

Full Name (Last, First, Middle Initial)

Mailing Address 49 FEDERAL STREET

City SALEM State MA Zip Code 01970

Purpose of Disbursement

Candidate Name JOHN TIERNEY

Office Sought:  House  Senate  President

State: MA District: 06

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: 9038873

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

**C. HALTER FOR US SENATE**

Full Name (Last, First, Middle Initial)

Mailing Address 902 W. 2ND STREET SUITE 3

City LITTLE ROCK State AR Zip Code 72201

Purpose of Disbursement

Candidate Name BILL HALTER

Office Sought:  House  Senate  President

State: AR District:

Disbursement For: 2010  Primary  General  Other (specify) ▼

Transaction ID: 9039727

Date of Disbursement

/   /

Amount of Each Disbursement this Period

Category/  
Type

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

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

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

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

FOR LINE NUMBER: (check only one)

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

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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) TED DEUTCH FOR CONGRESS	Transaction ID: 9039728 Date of Disbursement 03 / 26 / 2010
	Mailing Address 20423 STATE ROAD 7 SUITE F6-383	Amount of Each Disbursement this Period 5000.00
	City BOCA RATON State FL Zip Code 33498	
	Purpose of Disbursement	011 Category/Type
	Candidate Name TED DEUTCH	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DEMOCRATS WIN SEATS PAC	Transaction ID: 9039729 Date of Disbursement 03 / 26 / 2010
	Mailing Address POST OFFICE BOX 71147	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20024	
	Purpose of Disbursement	011 Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEBBIE WASSERMAN SCHULTZ FOR CONGRESS	Transaction ID: 9039736 Date of Disbursement 03 / 26 / 2010
	Mailing Address POST OFFICE BOX 71147	Amount of Each Disbursement this Period 5000.00
	City WASHINGTON State DC Zip Code 20024	
	Purpose of Disbursement	011 Category/Type
	Candidate Name DEBBIE W SCHULTZ	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 20	Disbursement For: 2010 <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 40 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

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

Mailing Address 1921 WEST 8TH STREET

City State Zip Code  
ERIE PA 16505

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
KATHY DAHLKEMPER

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: PA District: 03

Transaction ID: 9039737  
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)  
PEOPLE HELPING ILLINOIS LEAD (PHIL PAC)

Mailing Address 499 SOUTH CAPITOL STREET

City State Zip Code  
WASHINGTON DC 20003

Purpose of Disbursement

011  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
Disbursement For:  Primary  General  Other (specify) ▼  
State: District:

Transaction ID: 9039740  
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)  
HARRY MITCHELL FOR CONGRESS

Mailing Address POST OFFICE BOX 23748

City State Zip Code  
TEMPE AZ 85285

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
HARRY MITCHELL

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: AZ District: 05

Transaction ID: 9040230  
Date of Disbursement

03 / 26 / 2010

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

12000.00

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)  
UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) ELLSWORTH FOR INDIANA	Transaction ID: 9041305 Date of Disbursement 03 / 29 / 2010
	Mailing Address P.O. Box 62	Amount of Each Disbursement this Period 5000.00
	City Evansville State IN Zip Code 47701	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name BRAD ELLSWORTH	
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: IN District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) LEVIN FOR CONGRESS	Transaction ID: 9041306 Date of Disbursement 03 / 29 / 2010
	Mailing Address POST OFFICE BOX 37	Amount of Each Disbursement this Period 4000.00
	City ROSEVILLE State MI Zip Code 48066	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name SANDER M LEVIN	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MI District: 12	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) GOAL PAC	Transaction ID: 9041307 Date of Disbursement 03 / 29 / 2010
	Mailing Address POST OFFICE BOX 30344	Amount of Each Disbursement this Period 5000.00
	City BETHESDA State MD Zip Code 20824	
	Purpose of Disbursement	011 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	14000.00
<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

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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>GARAMENDI FOR CONGRESS</b>	<b>Transaction ID:</b> 9041308 Date of Disbursement 03 / 29 / 2010	
	Mailing Address C/O California Political Law, Inc. 3605 Long Beach Blvd., Ste. 426		
	City Long Beach State CA Zip Code 90807	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Candidate Name Mr. JOHN GARAMENDI Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 10 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>HOOSIERS FOR HILL</b>	<b>Transaction ID:</b> 9044039 Date of Disbursement 03 / 30 / 2010	
	Mailing Address 1 NORTH CAPITAL AVENUE SUITE 200		
	City INDIANAPOLIS State IN Zip Code 46204	Amount of Each Disbursement this Period 5000.00	
	Purpose of Disbursement Candidate Name BARON HILL Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 09 Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>CARNAHAN IN CONGRESS</b>	<b>Transaction ID:</b> 9044040 Date of Disbursement 03 / 30 / 2010	
	Mailing Address 7370 MANCHESTER ROAD SUITE 20		
	City ST. LOUIS State MO Zip Code 63143	Amount of Each Disbursement this Period 1000.00	
	Purpose of Disbursement Candidate Name RUSS CARNAHAN Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MO District: 03 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/ Type	

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

11000.00

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.	Full Name (Last, First, Middle Initial) ROB MILLER FOR CONGRESS	Transaction ID: 9044088 Date of Disbursement 03 / 30 / 2010
	Mailing Address 219 SCOTT'S STREET	Amount of Each Disbursement this Period 2500.00
	City BEAUFORT State SC Zip Code 29902	
	Purpose of Disbursement	011 Category/Type
	Candidate Name ROB MILLER	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: SC District: 00	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) Scott Murphy For Congress	Transaction ID: 9044089 Date of Disbursement 03 / 30 / 2010
	Mailing Address 3 Warren Street	Amount of Each Disbursement this Period 2000.00
	City Glens Falls State NY Zip Code 12801	
	Purpose of Disbursement	011 Category/Type
	Candidate Name Mr. H SCOTT MURPHY	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 20	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) PAUL TONKO FOR CONGRESS	Transaction ID: 9044090 Date of Disbursement 03 / 30 / 2010
	Mailing Address 911 CENTRAL AVENUE SUITE 221	Amount of Each Disbursement this Period 2500.00
	City ALBANY State NY Zip Code 12206	
	Purpose of Disbursement	011 Category/Type
	Candidate Name PAUL TONKO	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 21	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

7000.00

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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<p><b>A.</b> Full Name (Last, First, Middle Initial) LORI EDWARDS CAMPAIGN COMMITTEE</p> <p>Mailing Address POST OFFICE BOX 280</p> <p>City EAGLE LAKE State FL Zip Code 33839</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name LORI EDWARDS</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: FL District: 12</p>	<p><b>Transaction ID:</b> 9044091 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	0		2	0	1	0													
2500.00																						
<p><b>B.</b> Full Name (Last, First, Middle Initial) BLUMENAUER FOR CONGRESS</p> <p>Mailing Address 830 NE HOLLADAY, #105</p> <p>City PORTLAND State OR Zip Code 97232</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name EARL BLUMENAUER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 03</p>	<p><b>Transaction ID:</b> 9044092 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	0		2	0	1	0													
2500.00																						
<p><b>C.</b> Full Name (Last, First, Middle Initial) KURT SCHRADER FOR CONGRESS</p> <p>Mailing Address 607 N. MAIN STREET SUITE 240</p> <p>City OREGON CITY State OR Zip Code 97045</p> <p>Purpose of Disbursement <span style="float: right; border: 1px solid black; padding: 2px;">011</span> Category/Type</p> <p>Candidate Name KURT SCHRADER</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: OR District: 05</p>	<p><b>Transaction ID:</b> 9044093 <b>Date of Disbursement:</b>  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>3</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table> </p> <p>Amount of Each Disbursement this Period  <table border="1" style="width: 100%; text-align: center;"> <tr> <td>2500.00</td> </tr> </table> </p>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		3	0		2	0	1	0	2500.00
M	M	/	D	D	/	Y	Y	Y	Y													
0	3		3	0		2	0	1	0													
2500.00																						

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

**7500.00**

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>ROYBAL-ALLARD FOR CONGRESS</b>	<b>Transaction ID:</b> 9044094 Date of Disbursement 03 / 30 / 2010	
	Mailing Address 2730 WILSHIRE BLVD., SUITE 550		
	City State Zip Code SANTA MONICA CA 90403	Amount of Each Disbursement this Period	5000.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name LUCILLE ROYBAL-ALLARD		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 34	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>COURTNEY FOR CONGRESS</b>	<b>Transaction ID:</b> 9044095 Date of Disbursement 03 / 30 / 2010	
	Mailing Address POST OFFICE BOX 1372		
	City State Zip Code VERNON CT 06066	Amount of Each Disbursement this Period	2000.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name JOSEPH COURTNEY		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CT District: 02	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>MARCIA FUDGE FOR CONGRESS</b>	<b>Transaction ID:</b> 9044096 Date of Disbursement 03 / 30 / 2010	
	Mailing Address 4834 RICHMOND ROAD SUITE 150		
	City State Zip Code WARRENSVILLE HEIGH OH 44128	Amount of Each Disbursement this Period	2500.00
	Purpose of Disbursement	011	Category/Type
	Candidate Name MARCIA FUDGE		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: OH District: 11	Disbursement For: 2010 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

9500.00

**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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

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

Transaction ID: 9044832  
Date of Disbursement

Mailing Address POST OFFICE BOX A

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	0

City State Zip Code  
CLARK SUMMIT PA 18411

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2900.00
---------

Candidate Name  
CHRIS CARNEY

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: PA District: 10

B.

Full Name (Last, First, Middle Initial)  
Pike For Congress

Transaction ID: 9044836  
Date of Disbursement

Mailing Address PO Box 467

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	0

City State Zip Code  
Ardmore PA 19003

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

5000.00
---------

Candidate Name  
Mr. Douglas Pike

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: PA District: 06

C.

Full Name (Last, First, Middle Initial)  
PATRICK MURPHY FOR CONGRESS

Transaction ID: 9044841  
Date of Disbursement

Mailing Address 1631 EDGLEY ROAD

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	1	0

City State Zip Code  
LEVITTOWN PA 19057

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

1900.00
---------

Candidate Name  
PATRICK MURPHY

Office Sought:  House  Senate  President  
Disbursement For: 2010  Primary  General  Other (specify) ▼  
State: PA District: 08

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

9800.00
---------

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 47 / 47

<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)

UNITED FOOD & COMMERCIAL WORKERS INTERNATIONAL UNION ACTIVE BALLOT CLUB

A.

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

Mailing Address 557 MAIN STREET  
SUITE 100

City BETHLEHAM State PA Zip Code 18018

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
JOHN CALLAHAN

Office Sought:  House  Senate  President  
State: PA District: 00  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 9044844  
Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)  
DINA TITUS FOR CONGRESS

Mailing Address 3711 EAST SUNSET ROAD  
SUITE C-4

City LAS VEGAS State NV Zip Code 89120

Purpose of Disbursement

011  
Category/  
Type

Candidate Name  
DINA TITUS

Office Sought:  House  Senate  President  
State: NV District: 03  
Disbursement For: 2010  
 Primary  General  
 Other (specify) ▼

Transaction ID: 9044847  
Date of Disbursement

03 / 31 / 2010

Amount of Each Disbursement this Period

2500.00

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

7500.00

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

196800.00