

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
PLUMBERS LOCAL 14 P A C FUND

ADDRESS (number and street) 150 MAIN ST
 Check if different than previously reported. (ACC)
LODI NJ 07644

2. **FEC IDENTIFICATION NUMBER** C00191213
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

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

5. Covering Period 01 01 2008 through 03 31 2008

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 ERIC BOYCE

Signature of Treasurer Electronically Filed by ERIC BOYCE Date 04 08 2008

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

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
PLUMBERS LOCAL 14 P A C FUND

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		123055.77
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period	123055.77									
(c) Total Receipts (from Line 19)	45026.58	45026.58								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	168082.35	168082.35								
7. Total Disbursements (from Line 31)	44952.49	44952.49								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	123129.86	123129.86								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
PLUMBERS LOCAL 14 P A C FUND

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	8

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(i) Itemized (use Schedule A)	44449.43	44449.43
(ii) Unitemized	44449.43	44449.43
(iii) TOTAL (add Lines 11(a)(i) and (ii)	44449.43	44449.43
(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)	44449.43	44449.43
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	577.15	577.15
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))	45026.58	45026.58
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45026.58	45026.58

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	1459.21	1459.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1459.21	1459.21
22. Transfers to Affiliated/Other Party Committees.....	2600.18	2600.18
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2000.00	2000.00
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.....	38893.10	38893.10
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))..	44952.49	44952.49
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	44952.49	44952.49

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	44449.43	44449.43
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	44449.43	44449.43
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1459.21	1459.21
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	1459.21	1459.21

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 18
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A. Full Name (Last, First, Middle Initial)
Commerce Bank/North

Mailing Address 1100 Lake Street

City Ramsey State NJ Zip Code 07446-1275

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 270.76

Date of Receipt: 01 / 31 / 2008
Transaction ID: SA17.23881
Amount of Each Receipt this Period: 270.76
Interest

B. Full Name (Last, First, Middle Initial)
Commerce Bank/North

Mailing Address 1100 Lake Street

City Ramsey State NJ Zip Code 07446-1275

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 423.50

Date of Receipt: 02 / 29 / 2008
Transaction ID: SA17.23882
Amount of Each Receipt this Period: 152.74
Interest

C. Full Name (Last, First, Middle Initial)
Commerce Bank/North

Mailing Address 1100 Lake Street

City Ramsey State NJ Zip Code 07446-1275

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 577.15

Date of Receipt: 03 / 31 / 2008
Transaction ID: SA17.23883
Amount of Each Receipt this Period: 153.65
Interest

SUBTOTAL of Receipts This Page (optional) ► 577.15

TOTAL This Period (last page this line number only) ► 577.15

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.	Full Name (Last, First, Middle Initial) Amtrak	Transaction ID: SB21B.23847 Date of Disbursement 01 / 10 / 2008
	Mailing Address National Railroad Passenger Corp. 60 Massachusetts Avenue, NE	Amount of Each Disbursement this Period 270.00
	City Washington State DC Zip Code 20002	
	Purpose of Disbursement Meno entry for VISA	002 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) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) Building & Construction Trades Department, AFL-CIO	Transaction ID: SB21B.23874 Date of Disbursement 03 / 20 / 2008
	Mailing Address 815 16th Street, NW, Suite 600	Amount of Each Disbursement this Period 300.00
	City Washington State DC Zip Code 20006	
	Purpose of Disbursement Registration Fees	002 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) David A. Gerson, CPA & Associates, P.C.	Transaction ID: SB21B.23842 Date of Disbursement 01 / 08 / 2008
	Mailing Address 16 Arcadian Avenue, Suite C3	Amount of Each Disbursement this Period 500.00
	City Paramus State NJ Zip Code 07652	
	Purpose of Disbursement Accounting	001 Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	800.00
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 checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.	Full Name (Last, First, Middle Initial) David A. Gerson, CPA & Associates, P.C.	Transaction ID: SB21B.23856 Date of Disbursement																			
	Mailing Address 16 Arcadian Avenue, Suite C3	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td>/</td><td>0</td><td>6</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2	/	0	6	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2	/	0	6	/	2	0	0	8												
	City Paramus State NJ Zip Code 07652	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Accounting Candidate Name	<table border="1"><tr><td>100.00</td></tr></table>	100.00																		
100.00																					
	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) ▼																			
		001 Category/ Type																			

B.	Full Name (Last, First, Middle Initial) Hilton Washington	Transaction ID: SB21B.23848 Date of Disbursement																			
	Mailing Address 1919 Connecticut Avenue, NW	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	0	/	2	0	0	8												
	City Washington State DC Zip Code 20009	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Memo Entry for VISA Candidate Name	<table border="1"><tr><td>289.21</td></tr></table>	289.21																		
289.21																					
	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) ▼																			
		002 Category/ Type																			

[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) VISA (EB)	Transaction ID: SB21B.23845 Date of Disbursement																			
	Mailing Address P.O. Box 31279	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1	/	1	0	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1	/	1	0	/	2	0	0	8												
	City Tampa State FL Zip Code 33631-3279	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reimbursed Travel Expenses Candidate Name	<table border="1"><tr><td>559.21</td></tr></table>	559.21																		
559.21																					
	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) ▼																			
		002 Category/ Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>659.21</td></tr></table>	659.21
659.21		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td>1459.21</td></tr></table>	1459.21
1459.21		

**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 9 / 18

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.

Full Name (Last, First, Middle Initial)
UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Transaction ID: SB22.23844

Date of Disbursement

Mailing Address 901 Massachusetts Avenue NW

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

City Washington State DC Zip Code 20001

Amount of Each Disbursement this Period

2600.18

Purpose of Disbursement
Transfer

008
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2600.18

TOTAL This Period (last page this line number only)

2600.18

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

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

FOR LINE NUMBER:
(check only one)

PAGE 10 / 18

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.

Full Name (Last, First, Middle Initial)
JOE PENNACCHIO FOR CONGRESS

Transaction ID: SB23.23869

Mailing Address 62A WINDSOR DRIVE

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City State Zip Code
PINE BROOK NJ 07058

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Dinner Tickets

007
Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB23.23854

Mailing Address 6050 BOULEVARD EAST APT 6B

Date of Disbursement

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

City State Zip Code
WEST NEW YORK NJ 07093

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Dinner Tickets

007
Category/
Type

Candidate Name
ALBIO SIRES

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: NJ District: 13

SUBTOTAL of Disbursements This Page (optional)

2000.00

TOTAL This Period (last page this line number only)

2000.00

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A. Full Name (Last, First, Middle Initial)
Bayonne City Regular Democratic Organization

Mailing Address P.O. Box 1063

City Bayonne State NJ Zip Code 07002

Purpose of Disbursement

Dinner Tickets

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.23879

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

750.00

B. Full Name (Last, First, Middle Initial)
Bergen County Democratic Organization

Mailing Address P.O. Box 488

City Hackensack State NJ Zip Code 07602

Purpose of Disbursement

Contribution

Candidate Name

012
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.23880

Date of Disbursement

03 / 26 / 2008

Amount of Each Disbursement this Period

5000.00

C. Full Name (Last, First, Middle Initial)
Chiappone for Assembly

Mailing Address 155 Polifly Road
Suite 103

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement

Dinner Tickets

Candidate Name

007
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.23861

Date of Disbursement

02 / 14 / 2008

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

6750.00

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 12 / 18

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

<p>A. Full Name (Last, First, Middle Initial) Comm. to Elect Vincent Prieto Assemblyman</p> <p>Mailing Address 155 Polify Road Suite 103, 1st Floor</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23878</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Jim Carroll</p> <p>Mailing Address P.O. Box 94</p> <p>City Demarest State NJ Zip Code 07627</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23849</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Election Fund Of Joan Quigley</p> <p>Mailing Address 155 Polify Road Suite 103, 1st Floor</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23877</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="2000.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5000.00"/>
TOTAL 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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.

Full Name (Last, First, Middle Initial)
Election Fund of Paul Sarlo

Transaction ID: SB29.23839
Date of Disbursement

Mailing Address 9 Lincoln Avenue

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

City Rutherford State NJ Zip Code 07070

Amount of Each Disbursement this Period

Purpose of Disbursement
Dinner Tickets

007
Category/ Type

1000.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
Elmwood Park Democratic Victory 08

Transaction ID: SB29.23872
Date of Disbursement

Mailing Address P.O. Box 492

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

City Elmwood Park State NJ Zip Code 07407

Amount of Each Disbursement this Period

Purpose of Disbursement
Dinner Tickets

007
Category/ Type

320.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
Essex County Democratic Committee

Transaction ID: SB29.23858
Date of Disbursement

Mailing Address 50 Park Place
Suite 1430

M	M	/	D	D	/	Y	Y	Y	Y
0	2		1	4		2	0	0	8

City Newark State NJ Zip Code 07102

Amount of Each Disbursement this Period

Purpose of Disbursement
Dinner Tickets

007
Category/ Type

800.00

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

2120.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.	Full Name (Last, First, Middle Initial) Friends of Miguel Diaz	Transaction ID: SB29.23864 Date of Disbursement																			
	Mailing Address 415 East 40th Street	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
	City Paterson State NJ Zip Code 07504	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dinner Tickets	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	007 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) Friends Of Pat Lepore	Transaction ID: SB29.23863 Date of Disbursement																			
	Mailing Address 1244 McBride Avenue	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	4		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	4		2	0	0	8												
	City West Paterson State NJ Zip Code 07424	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	012 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) MAC PAC	Transaction ID: SB29.23852 Date of Disbursement																			
	Mailing Address c/o IBEW Local 164 205 Robin Road	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>1</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		1	8		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		1	8		2	0	0	8												
	City Paramus State NJ Zip Code 07652	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2008 Council & PAC Fees	<table border="1"><tr><td>8200.00</td></tr></table>	8200.00																		
8200.00																					
	Candidate Name	008 Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>9200.00</td></tr></table>	9200.00
9200.00		
TOTAL 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)

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A.	Full Name (Last, First, Middle Initial) MCANJ Political Action Committee <hr/> Mailing Address 211 Mountain Avenue <hr/> City Springfield State NJ Zip Code 07081-0390 <hr/> Purpose of Disbursement Ad Book Sponsor 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: SB29.23841 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Morris County Democratic Committee <hr/> Mailing Address P.O. Box 306 <hr/> City Morristown State NJ Zip Code 07963-0306 <hr/> Purpose of Disbursement Dinner Tickets 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: SB29.23860 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) New Jersey State Pipe Trades PAC Fund <hr/> Mailing Address 534 South Route 73 <hr/> City Winslow State NJ Zip Code 08095 <hr/> Purpose of Disbursement Contributions 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: SB29.23843 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 8 / 2 0 0 8	Amount of Each Disbursement this Period 1595.68

SUBTOTAL of Disbursements This Page (optional)	2345.68
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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

A. Full Name (Last, First, Middle Initial) New Jersey State Pipe Trades PAC Fund <hr/> Mailing Address 534 South Route 73 <hr/> City Winslow State NJ Zip Code 08095 <hr/> Purpose of Disbursement Non-Federal Affiliate Contributions Candidate Name	Transaction ID: SB29.23857 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 8
	Amount of Each Disbursement this Period 1508.16
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 008

B. Full Name (Last, First, Middle Initial) New Jersey State Pipe Trades PAC Fund <hr/> Mailing Address 534 South Route 73 <hr/> City Winslow State NJ Zip Code 08095 <hr/> Purpose of Disbursement Non-Federal Affiliate Contributions Candidate Name	Transaction ID: SB29.23871 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 7 / 2 0 0 8
	Amount of Each Disbursement this Period 1519.26
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 008

C. Full Name (Last, First, Middle Initial) Oroho For Senate <hr/> Mailing Address P.O. Box 249 <hr/> City Franklin State NJ Zip Code 07416 <hr/> Purpose of Disbursement Contribution Candidate Name	Transaction ID: SB29.23859 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 4 / 2 0 0 8
	Amount of Each Disbursement this Period 1000.00
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 012

SUBTOTAL of Disbursements This Page (optional) ▶	4027.42
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)

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

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NAME OF COMMITTEE (In Full)
PLUMBERS LOCAL 14 P A C FUND

<p>A. Full Name (Last, First, Middle Initial) Passaic County Democratic Committee</p> <p>Mailing Address 811 Clifton Avenue</p> <p>City Clifton State NJ Zip Code 07013</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23853</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p>
<p>B. Full Name (Last, First, Middle Initial) Sweeney for Senate</p> <p>Mailing Address 300 North Marion Avenue</p> <p>City Wenonah State NJ Zip Code 08090</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23868</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="2"/> / <input type="text" value="1"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="5000.00"/></p>
<p>C. Full Name (Last, First, Middle Initial) Victory 2008</p> <p>Mailing Address 50 Main Street</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement Dinner Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.23850</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="8"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1200.00"/></p>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="7200.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value="38893.10"/>