

# 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  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

ADDRESS (number and street) 65 SPRINGFIELD AVENUE  
 Check if different than previously reported. (ACC)  
SPRINGFIELD NJ 07081

2. **FEC IDENTIFICATION NUMBER** C00017194  
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 04 01 2008 through 06 30 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 Joseph Whittles

Signature of Treasurer Electronically Filed by Joseph Whittles Date 07 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  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION  
COMMITT

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

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		111140.20
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	142017.12									
(c) Total Receipts (from Line 19) .....	87326.95	136347.83								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	229344.07	247488.03								
7. Total Disbursements (from Line 31) .....	35374.45	53518.41								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	193969.62	193969.62								
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

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION  
COMMITT

Report Covering the Period: From: 

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	6

D	D
3	0

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) .....		
(ii) Unitemized .....	87178.27	136044.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	87178.27	136044.68
(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) .....	87178.27	136044.68
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.) .....	148.68	303.15
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)) .....	87326.95	136347.83
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	87326.95	136347.83

**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.....	14424.45	18118.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	14424.45	18118.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	6000.00
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.....	20950.00	29400.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share.....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds.....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	35374.45	53518.41
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	35374.45	53518.41

**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 .....	87178.27	136044.68
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	87178.27	136044.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	14424.45	18118.41
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	14424.45	18118.41

**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 / 18
	<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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: SA17.5971</b>
Name of Employer		Occupation	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"/> 0.42
		<input type="text"/> 154.89	Interest earned

<b>B.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: SA17.5972</b>
Name of Employer		Occupation	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"/> 0.59
		<input type="text"/> 155.48	Interest earned

<b>C.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y 06 / 30 / 2008
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID: SA17.5973</b>
Name of Employer		Occupation	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"/> 66.36
		<input type="text"/> 221.84	Interest earned

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 67.37
<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 7 / 18
	<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	

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5974
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text" value="72.58"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Interest earned
		<input type="text" value="294.42"/>	

<b>B.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5975
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text" value="1.79"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Interest earned
		<input type="text" value="296.21"/>	

<b>C.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5976
Name of Employer		Occupation	Amount of Each Receipt this Period
			<input type="text" value="1.70"/>
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	Interest earned
		<input type="text" value="297.91"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="76.07"/>
<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 8 / 18
	<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	

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NAME OF COMMITTEE (In Full)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5977
Name of Employer		Occupation	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" value="1.82"/>
		<input type="text" value="299.73"/>	Interest earned

<b>B.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5978
Name of Employer		Occupation	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" value="1.76"/>
		<input type="text" value="301.49"/>	Interest earned

<b>C.</b>	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.		Date of Receipt
	Mailing Address NC8502 P.O. BOX 563966		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City	State	Zip Code
	CHARLOTTE	NC	28262-3966
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA17.5979
Name of Employer		Occupation	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" value="1.66"/>
		<input type="text" value="303.15"/>	Interest earned

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="5.24"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="148.68"/>



**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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
WACHOVIA BANK, NATIONAL ASSOC.

Transaction ID: SB21B.5981

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Mailing Address NC8502  
P.O. BOX 563966

Amount of Each Disbursement this Period

25.00
-------

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank charge

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)  
WACHOVIA BANK, NATIONAL ASSOC.

Transaction ID: SB21B.5982

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Mailing Address NC8502  
P.O. BOX 563966

Amount of Each Disbursement this Period

40.12
-------

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank charge

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)  
WACHOVIA BANK, NATIONAL ASSOC.

Transaction ID: SB21B.5983

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		3	0		2	0	0	8

Mailing Address NC8502  
P.O. BOX 563966

Amount of Each Disbursement this Period

41.33
-------

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank charge

Category/ Type
-------------------

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

106.45
--------

**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)

<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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.	Transaction ID: SB21B.5984 Date of Disbursement
	Mailing Address NC8502 P.O. BOX 563966	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City CHARLOTTE State NC Zip Code 28262-3966	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank charge Candidate Name	<input type="text" value="18.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.	Transaction ID: SB21B.5985 Date of Disbursement
	Mailing Address NC8502 P.O. BOX 563966	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City CHARLOTTE State NC Zip Code 28262-3966	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank charge Candidate Name	<input type="text" value="5.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.	Transaction ID: SB21B.5986 Date of Disbursement
	Mailing Address NC8502 P.O. BOX 563966	<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2008"/>
	City CHARLOTTE State NC Zip Code 28262-3966	Amount of Each Disbursement this Period
	Purpose of Disbursement Bank charge Candidate Name	<input type="text" value="5.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Category/Type
	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="28.00"/>
<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 12 / 18

<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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.	Transaction ID: SB21B.5987 Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	Mailing Address NC8502 P.O. BOX 563966 City CHARLOTTE State NC Zip Code 28262-3966 Purpose of Disbursement Bank charge 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) ▼ Category/Type
Amount of Each Disbursement this Period 5.00	
<b>B.</b> Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.	Transaction ID: SB21B.5988 Date of Disbursement MM / DD / YYYY 06 / 30 / 2008
	Mailing Address NC8502 P.O. BOX 563966 City CHARLOTTE State NC Zip Code 28262-3966 Purpose of Disbursement Bank charge 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) ▼ Category/Type
Amount of Each Disbursement this Period 5.00	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	▶	10.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	14424.45

# 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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>BOOKER TEAM FOR NEWARK</b>	<b>Transaction ID:</b> SB29.6012
	Mailing Address 60 Park Place 21st Floor	Date of Disbursement MM / DD / YYYY 06 / 04 / 2008
	City Newark State NJ Zip Code 07102	Amount of Each Disbursement this Period 2000.00
	Purpose of Disbursement: Dinner Tickets Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <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>BUCCO FOR SENATE</b>	<b>Transaction ID:</b> SB29.6005
	Mailing Address PO BOX 220	Date of Disbursement MM / DD / YYYY 04 / 29 / 2008
	City SUCCASUNNA State NJ Zip Code 07876	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement: Outing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>CITIZENS FOR CALHOUN</b>	<b>Transaction ID:</b> SB29.5998
	Mailing Address P.O. Box 59	Date of Disbursement MM / DD / YYYY 06 / 05 / 2008
	City Washingtonville State NY Zip Code 10992	Amount of Each Disbursement this Period 600.00
	Purpose of Disbursement: Outing Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	011 Category/Type

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

3100.00

**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 14 / 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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION  
COMMITT

A.	Full Name (Last, First, Middle Initial) CITIZENS TO ELECT JOHN BONACIC	Transaction ID: SB29.5990 Date of Disbursement																			
	Mailing Address P.O. Box 425	<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>4</td><td></td><td>2</td><td>9</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	4		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	8												
	City New Hampton State NY Zip Code 10958	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reception	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) Delaware County Republican Committee	Transaction ID: SB29.5989 Date of Disbursement																			
	Mailing Address P.O. Box 752	<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>4</td><td></td><td>2</td><td>2</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	4		2	2		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	2		2	0	0	8												
	City Sidney State NY Zip Code 13838	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reception	<table border="1"><tr><td>750.00</td></tr></table>	750.00																		
750.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) FRIENDS OF AL DONAHUE	Transaction ID: SB29.5991 Date of Disbursement																			
	Mailing Address 156 Second 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>4</td><td></td><td>2</td><td>9</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	4		2	9		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		2	9		2	0	0	8												
	City Buchanan State NY Zip Code 10511	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reception	<table border="1"><tr><td>950.00</td></tr></table>	950.00																		
950.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>2200.00</td></tr></table>	2200.00
2200.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td></td></tr></table>	



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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF NICK WOERNER	Transaction ID: SB29.5992 Date of Disbursement																			
	Mailing Address P.O. Box 1444	<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>4</td><td>/</td><td>2</td><td>9</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	4	/	2	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4	/	2	9	/	2	0	0	8												
	City Kingston State NY Zip Code 12402	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Outing	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) JERSEY CITY DEMOCRATIC COMMITTEE	Transaction ID: SB29.6013 Date of Disbursement																			
	Mailing Address PO BOX 13	<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>6</td><td>/</td><td>2</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	6	/	2	4	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6	/	2	4	/	2	0	0	8												
	City JERSEY CITY State NJ Zip Code 07303	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Reception	<table border="1"><tr><td>5000.00</td></tr></table>	5000.00																		
5000.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) JOSEPH DI VINCENZO FOR ESSEX COUNTY EXECUTIVE INC	Transaction ID: SB29.6001 Date of Disbursement																			
	Mailing Address 49 GARDEN AVE	<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>4</td><td>/</td><td>2</td><td>9</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	4	/	2	9	/	2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	4	/	2	9	/	2	0	0	8												
	City BELLEVILLE State NJ Zip Code 07109	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Dinner Tickets	<table border="1"><tr><td>1200.00</td></tr></table>	1200.00																		
1200.00																					
	Candidate Name	<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<table border="1"><tr><td>6700.00</td></tr></table>	6700.00
6700.00		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)  
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

<p><b>A.</b> Full Name (Last, First, Middle Initial) MIDDLESEX COUNTY AFL-CIO LABOR COUNCIL</p> <p>Mailing Address 15 DEBONIS DRIVE</p> <p>City MILLTOWN State NJ Zip Code 08850</p> <p>Purpose of Disbursement Reception</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.5999</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 1 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 800.00</p> <p>Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Sean Kean for Senate</p> <p>Mailing Address 100 Begonia Court</p> <p>City Jackson State NJ Zip Code 08527</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: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6010</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 4 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>Category/Type 011</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) SENATOR JOHN J. BONACIC</p> <p>Mailing Address 201 Dolson Ave., Suite F</p> <p>City Middletown State NY Zip Code 10940</p> <p>Purpose of Disbursement RECEPTION</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: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.5995</p> <p>Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 0 8</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>Category/Type 011</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>1900.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

**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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
SOUTH NJ LABOR ADVOCACY FUND, INC

Mailing Address PO BOX 1065

City PENNSAUKEN State NJ Zip Code 08109

Purpose of Disbursement

Event Sponsor

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6009

Date of Disbursement

05 / 19 / 2008

Amount of Each Disbursement this Period

1750.00

**B.** Full Name (Last, First, Middle Initial)  
THE LEADERS FUND

Mailing Address PO BOX 3503

City CHERRY HILL State NJ Zip Code 08034

Purpose of Disbursement

Reception

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For: 2008  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.6008

Date of Disbursement

04 / 29 / 2008

Amount of Each Disbursement this Period

2000.00

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

3750.00

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

20950.00