

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 50-02 5th Street, 2nd Fl Long Island City NY 11101

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C C00327478 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15 Quarterly Report (Q1) (b) Monthly Report Due On: Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (c) 12-Day PRE-Election Report for the: Primary (12P) General (12G) Runoff (12R) (d) 30-Day POST-Election Report for the: General (30G) Runoff (30R) Special (30S)

5. Covering Period 01 / 01 / 2020 through 03 / 31 / 2020

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. O'CONNOR, PAUL, , ,

Type or Print Name of Treasurer

Signature of Treasurer O'CONNOR, PAUL, , , [Electronically Filed] Date 04 / 14 / 2020

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 52 U.S.C. § 30109.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		447126.25
(b) Cash on Hand at Beginning of Reporting Period.....	447126.25	
(c) Total Receipts (from Line 19) .....	58364.51	58364.51
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	505490.76	505490.76
7. Total Disbursements (from Line 31).....	64238.25	64238.25
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	441252.51	441252.51
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

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

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).....	0.00	0.00
(ii) Unitemized .....	58301.02	58301.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	58301.02	58301.02
(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) .....	58301.02	58301.02
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.).....	63.49	63.49
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 Transfers (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)).....▶	58364.51	58364.51
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	58364.51	58364.51

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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 .....	6480.25	6480.25
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	6480.25	6480.25
22. Transfers to Affiliated/Other Party Committees.....	14308.00	14308.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(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 (Including Non-Federal Donations).....	43450.00	43450.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated 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)) ..	64238.25	64238.25
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	64238.25	64238.25

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	58301.02	58301.02
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	58301.02	58301.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	6480.25	6480.25
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	6480.25	6480.25

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Hillstar Promotions, Ltd**

Mailing Address 4400 Manor Lane

City  
Hamburg

State  
NY

Zip Code  
14075

Purpose of Disbursement  
Purchase of T-Shirts

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			0	6			2	0	2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.8955**  
Amount of Each Disbursement this Period  
[Redacted] **6170.25**

Memo Item

Full Name (Last, First, Middle Initial)

**B. M & T Bank**

Mailing Address 10-30 Jackson Avenue

City  
LIC

State  
NY

Zip Code  
11101

Purpose of Disbursement  
Bank Fees

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify)

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	3			0	9			2	0	2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.9027**  
Amount of Each Disbursement this Period  
[Redacted] **64.00**

Memo Item

Full Name (Last, First, Middle Initial)

**C. United States Treasury**

Mailing Address Internal Revenue Service

City  
Ogden

State  
UT

Zip Code  
84201

Purpose of Disbursement  
Taxes - 1120POL Return (2019)

**001**  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M	M	M	/	D	D	D	/	Y	Y	Y	Y	Y	Y
0	2			2	6			2	0	2	0		

FEC Identification Number

**C** [Redacted]  
**Transaction ID : SB21B.9028**  
Amount of Each Disbursement this Period  
[Redacted] **65.00**

Memo Item

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

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

[Redacted]	<b>6299.25</b>
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[Redacted]	<b>6299.25</b>
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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 type="checkbox"/> 21b	<input checked="" type="checkbox"/> 22	<input type="checkbox"/> 23	<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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UA POLITICAL EDUCATION COMMITTEE**

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 12/2019

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.8956**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. UA POLITICAL EDUCATION COMMITTEE**

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 01/2020

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.8957**

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. UA POLITICAL EDUCATION COMMITTEE**

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 02/2020

001  
 002  
 003  
 004  
 005  
 006  
 007  
 008  
 009  
 010

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB22.8958**

Amount of Each Disbursement this Period

Memo Item

**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 type="checkbox"/> 23	<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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ABBATE FOR ASSEMBLY</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address PO Box 235			FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8972</b>	
City Brooklyn	State NY	Zip Code 11228-0235	Amount of Each Disbursement this Period [REDACTED] 1500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>	
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:				

Full Name (Last, First, Middle Initial) <b>B. ANDREW LANZA FOR STATEN ISLAND</b>			Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address PO Box 352			FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9020</b>	
City Staten Island	State NY	Zip Code 10312	Amount of Each Disbursement this Period [REDACTED] 500.00	
Purpose of Disbursement Contribution 2 Guest St Pats Fundraiser 03/14/20		Category/ Type 011	Memo Item <input type="checkbox"/>	
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:				

Full Name (Last, First, Middle Initial) <b>C. BENEDETTO FOR ASSEMBLY</b>			Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address c/o L. Benedetto-940 Wilcox Avenue			FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8998</b>	
City Bronx	State NY	Zip Code 10465	Amount of Each Disbursement this Period [REDACTED] 1500.00	
Purpose of Disbursement Contribution		Category/ Type 011	Memo Item <input type="checkbox"/>	
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).....▶	[REDACTED] 3500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]



**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Carmen De La Rosa 2020**

Mailing Address 23 Richmond Place

City  
Cortland Manor

State  
NY

Zip Code  
10567

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.9005**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Charles Fall for NY**

Mailing Address 173 Maple Pkwy

City  
Staten Island

State  
NY

Zip Code  
10303

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.8962**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. Citizens for Lentol**

Mailing Address 163 Washington Ave. Apt 4B

City  
Brooklyn

State  
NY

Zip Code  
11205

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.8977**  
Amount of Each Disbursement this Period

Memo Item

**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 type="checkbox"/> 23	<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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT JEFFRION AUBRY**

Mailing Address 151 Beach 96th St. Apt 6D

City Rockaway Beach State NY Zip Code 11693

Purpose of Disbursement Contribution

Category/Type

Candidate Name

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

Date of Disbursement  

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

FEC Identification Number  
  
**Transaction ID : SB29.8964**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Committee To Elect Walter T. Mosley**

Mailing Address 333 Layfayette Ave, Apt 22N

City Brooklyn State NY Zip Code 11238

Purpose of Disbursement Contribution

Category/Type

Candidate Name

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

Date of Disbursement  

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

FEC Identification Number  
  
**Transaction ID : SB29.8985**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. CUSICK FOR ASSEMBLY**

Mailing Address PO Box 141279

City Staten Island State NY Zip Code 10314

Purpose of Disbursement Contribution - Supporter Tickets 03/12/20

Category/Type

Candidate Name

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

Date of Disbursement  

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	7		2	0	2	0

FEC Identification Number  
  
**Transaction ID : SB29.9019**  
 Amount of Each Disbursement this Period

Memo Item

**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 type="checkbox"/> 23	<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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

**A. Dickens for New York**

Full Name (Last, First, Middle Initial)

Mailing Address 2386 Adam Clayton Powell Blvd.

City New York State NY Zip Code 10030

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB29.8986

Amount of Each Disbursement this Period: 1500.00

Memo Item

**B. Dilan for Assembly**

Full Name (Last, First, Middle Initial)

Mailing Address 70 Richmond St.

City Brooklyn State NY Zip Code 11208

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB29.8983

Amount of Each Disbursement this Period: 1500.00

Memo Item

**C. Friends of Al Taylor**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 321728

City New York State NY Zip Code 10032

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 02 / 03 / 2020

FEC Identification Number: C

Transaction ID : SB29.8988

Amount of Each Disbursement this Period: 1500.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 4500.00

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Friends of Aravella</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 21-63 42nd Street		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8966</b> Amount of Each Disbursement this Period [REDACTED] 1500.00
City Astoria	State NY	Zip Code 11105
Purpose of Disbursement Contribution		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) <b>B. Friends of Assemblyman Jeffrey Dinowitz</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020
Mailing Address 2790 Broadway #7F		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8994</b> Amount of Each Disbursement this Period [REDACTED] 1500.00
City New York	State NY	Zip Code 10025
Purpose of Disbursement		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
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:		

Full Name (Last, First, Middle Initial) <b>C. Friends of Assemblyman Jeffrey Dinowitz</b>		Date of Disbursement MM / DD / YYYY 02 / 11 / 2020
Mailing Address 2790 Broadway #7F		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9013</b> Amount of Each Disbursement this Period [REDACTED] 2750.00
City New York	State NY	Zip Code 10025
Purpose of Disbursement		<input type="checkbox"/> 011 Category/ Type
Candidate Name		<input type="checkbox"/> Memo Item
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).....▶	[REDACTED] 5750.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Friends of Brian Barnwell</b>		Date of Disbursement MM / DD / YYYY 03 / 10 / 2020	
Mailing Address PO Box 9056		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9024</b> Amount of Each Disbursement this Period [REDACTED] 1700.00	
City Astoria	State NY	Zip Code 11103	Category/ Type 011
Purpose of Disbursement Contribution		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) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>B. Friends of Felix W. Ortiz</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address 50 Delaware Ave Apt 1		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9003</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Albany	State NY	Zip Code 12202	Category/ Type 011
Purpose of Disbursement Contribution		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) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

Full Name (Last, First, Middle Initial) <b>C. Friends of Harry Bronson</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address 88 Sweden Hill Road		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9002</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Brockport	State NY	Zip Code 14420	Category/ Type 011
Purpose of Disbursement Contribution		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) ▼		Memo Item <input type="checkbox"/>
State: _____	District: _____		

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 4700.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. Friends of Michael Reilly</b>		Date of Disbursement MM / DD / YYYY 01 / 31 / 2020	
Mailing Address 323 Colon Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8961</b> Amount of Each Disbursement this Period [REDACTED] 1000.00	
City Staten Island	State NY	Zip Code 10308	Category/ Type 011
Purpose of Disbursement Contribution Gold Sponsor		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>B. FRIENDS OF MIKE MILLER FOR ASSEMBLY</b>		Date of Disbursement MM / DD / YYYY 02 / 03 / 2020	
Mailing Address 75-17 Mryle Avenue		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.8971</b> Amount of Each Disbursement this Period [REDACTED] 1500.00	
City Glendale	State NY	Zip Code 11385	Category/ Type 011
Purpose of Disbursement Contribution		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Katz NYS</b>		Date of Disbursement MM / DD / YYYY 02 / 27 / 2020	
Mailing Address c/o Culver Place Strategies 32 Union Sq. East Suite 1211		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.9023</b> Amount of Each Disbursement this Period [REDACTED] 2500.00	
City New York	State NY	Zip Code 10003	Category/ Type 011
Purpose of Disbursement Contribution Tinanium		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) ▼		Memo Item <input type="checkbox"/>
State: District:			

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	[REDACTED] 5000.00
<b>TOTAL</b> This Period (last page this line number only).....▶	[REDACTED]

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Latoya Joyner for Assembly**

Mailing Address 70 East 162 St. Apt #1J

City Bronx State NY Zip Code 10452

Purpose of Disbursement Contribution

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.8990**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B. Maritza Davila for Assembly**

Mailing Address c/o Luis Escobar  
244 Fifth Ave - Suite 2166

City New York State NY Zip Code 10001

Purpose of Disbursement Contribution

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.9016**  
 Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C. MICHAEL G. DEN DEKKER FOR ASSEMBLY**

Mailing Address 77-18 31 Avenue

City East Elmhurst State NY Zip Code 11370

Purpose of Disbursement Contribution

Category/Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.8963**  
 Amount of Each Disbursement this Period

Memo Item

**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 type="checkbox"/> 23	<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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. New Yorkers for Savino**

Mailing Address C/O The Advance Group  
39 Broadway Ste 1740

City New York State NY Zip Code 10006

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 11 / 2020

FEC Identification Number

C  
Transaction ID : **SB29.9014**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Nolan 2020**

Mailing Address P.O. BOX 4235

City Sunnyside State NY Zip Code 11104

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 03 / 2020

FEC Identification Number

C  
Transaction ID : **SB29.8969**  
Amount of Each Disbursement this Period  
1500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Nolan 2020**

Mailing Address P.O. BOX 4235

City Sunnyside State NY Zip Code 11104

Purpose of Disbursement  
Contribution

011  
Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
02 / 27 / 2020

FEC Identification Number

C  
Transaction ID : **SB29.9018**  
Amount of Each Disbursement this Period  
2500.00

Memo Item

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

6500.00

**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"/> 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 UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. Sean Ryan for Senate**

Mailing Address C/O Michael Senay  
335 Madison Ave 9 Fl.

City New York State NY Zip Code 10017

Purpose of Disbursement  
Contribution

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB29.9012**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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