

# 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  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

ADDRESS (number and street) 2556 SENECA AVENUE  
 Check if different than previously reported. (ACC)  
NIAGARA FALLS NY 14305

2. **FEC IDENTIFICATION NUMBER** C00155069  
**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 07 01 2007 through 12 31 2007

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 Enrico D. Liberale

Signature of Treasurer Electronically Filed by Enrico D. Liberale Date 04 13 2007

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		160838.84
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	155674.30									
(c) Total Receipts (from Line 19) .....	24644.31	43667.79								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	180318.61	204506.63								
7. Total Disbursements (from Line 31) .....	21353.90	45541.92								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	158964.71	158964.71								
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  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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	3188.45	3567.17
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	21455.86	39100.62
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	24644.31	42667.79
(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) .....	24644.31	42667.79
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.) .....	0.00	1000.00
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)) .....	24644.31	43667.79
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	24644.31	43667.79

**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.....	1953.90	4603.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	1953.90	4603.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	19400.00	40938.00
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))..	21353.90	45541.92
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	21353.90	45541.92

**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 .....	24644.31	42667.79
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	24644.31	42667.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	1953.90	4603.92
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	1953.90	4603.92

**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 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVEN BEAHEN		Date of Receipt
	Mailing Address 513 NORTHFIELD DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 6 / 2 0 0 7
	City	State	Zip Code
	YOUNGSTOWN	NY	14174
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23404
Name of Employer TRI - C INC.		Occupation LABORER	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"/> 209.88	<input type="text"/> 11.03

<b>B.</b>	Full Name (Last, First, Middle Initial) STEVEN BEAHEN		Date of Receipt
	Mailing Address 513 NORTHFIELD DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 6 / 2 0 0 7
	City	State	Zip Code
	YOUNGSTOWN	NY	14174
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23418
Name of Employer TRI - C INC.		Occupation LABORER	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"/> 230.02	<input type="text"/> 20.14

<b>C.</b>	Full Name (Last, First, Middle Initial) STEVEN BEAHEN		Date of Receipt
	Mailing Address 513 NORTHFIELD DRIVE		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 1 7 / 2 0 0 7
	City	State	Zip Code
	YOUNGSTOWN	NY	14174
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23695
Name of Employer TRI - C INC.		Occupation LABORER	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"/> 236.81	<input type="text"/> 6.79

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 37.96
<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 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
		<input type="checkbox"/> 15
		<input type="checkbox"/> 16
		<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) STEVEN BEAHEN	Date of Receipt MM / DD / YYYY 12 / 19 / 2007
	Mailing Address 513 NORTHFIELD DRIVE	<b>Transaction ID:</b> SA11AI.23733
	City State Zip Code YOUNGSTOWN NY 14174	Amount of Each Receipt this Period 4.91
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation TRI - C INC. LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.72	

<b>B.</b>	Full Name (Last, First, Middle Initial) JAMES BELLRENG	Date of Receipt MM / DD / YYYY 08 / 10 / 2007
	Mailing Address 334 BRAMPTON ROAD	<b>Transaction ID:</b> SA11AI.22287
	City State Zip Code YOUNGSTOWN NY 14174	Amount of Each Receipt this Period 19.65
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DULUTH ENVIRONMENTAL SERVICES LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.25	

<b>C.</b>	Full Name (Last, First, Middle Initial) JAMES BELLRENG	Date of Receipt MM / DD / YYYY 09 / 06 / 2007
	Mailing Address 334 BRAMPTON ROAD	<b>Transaction ID:</b> SA11AI.22558
	City State Zip Code YOUNGSTOWN NY 14174	Amount of Each Receipt this Period 29.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation DULUTH ENVIRONMENTAL SERVICES LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 248.99	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	54.30
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) JAMES BELLRENG</p> <p>Mailing Address 334 BRAMPTON ROAD</p> <p>City State Zip Code YOUNGSTOWN NY 14174</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer DULUTH ENVIRONMENTAL SERVICES</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">254.99</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 10 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.22610</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">6.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) JAMES BELLRENG</p> <p>Mailing Address 334 BRAMPTON ROAD</p> <p>City State Zip Code YOUNGSTOWN NY 14174</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer DULUTH ENVIRONMENTAL SERVICES</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">284.73</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">10 / 04 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.22941</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">29.74</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) JAMES BELLRENG</p> <p>Mailing Address 334 BRAMPTON ROAD</p> <p>City State Zip Code YOUNGSTOWN NY 14174</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer DULUTH ENVIRONMENTAL SERVICES</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">297.25</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">11 / 05 / 2007</span></p> <p><b>Transaction ID:</b> SA11AI.23238</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">12.52</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">48.26</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) JAMES BELLRENG		Date of Receipt MM / DD / YYYY 11 / 08 / 2007
Mailing Address 334 BRAMPTON ROAD		<b>Transaction ID:</b> SA11AI.23259
City YOUNGSTOWN	State NY	Zip Code 14174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 14.74
Name of Employer DULUTH ENVIRONMENTAL SERVICES	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 311.99	

**B.**

Full Name (Last, First, Middle Initial) JAMES BELLRENG		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 334 BRAMPTON ROAD		<b>Transaction ID:</b> SA11AI.23401
City YOUNGSTOWN	State NY	Zip Code 14174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 5.10
Name of Employer DULUTH ENVIRONMENTAL SERVICES	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 317.09	

**C.**

Full Name (Last, First, Middle Initial) JAMES BELLRENG		Date of Receipt MM / DD / YYYY 12 / 17 / 2007
Mailing Address 334 BRAMPTON ROAD		<b>Transaction ID:</b> SA11AI.23662
City YOUNGSTOWN	State NY	Zip Code 14174
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 26.36
Name of Employer DULUTH ENVIRONMENTAL SERVICES	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 343.45	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	46.20
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 10 / 55
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL CAMPBELL	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 0 5 / 2 0 0 7
	Mailing Address 1960 HARTLAND ROAD	<b>Transaction ID:</b> SA11AI.22965
	City State Zip Code APPLETON NY 14008	Amount of Each Receipt this Period 20.74
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation BABCOCK UTILITIES LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 218.64	

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL CAMPBELL	Date of Receipt M M / D D / Y Y Y Y Y 1 0 / 2 2 / 2 0 0 7
	Mailing Address 1960 HARTLAND ROAD	<b>Transaction ID:</b> SA11AI.23175
	City State Zip Code APPLETON NY 14008	Amount of Each Receipt this Period 37.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation BABCOCK UTILITIES LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 255.95	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL CAMPBELL	Date of Receipt M M / D D / Y Y Y Y Y 1 1 / 0 5 / 2 0 0 7
	Mailing Address 1960 HARTLAND ROAD	<b>Transaction ID:</b> SA11AI.23232
	City State Zip Code APPLETON NY 14008	Amount of Each Receipt this Period 16.31
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation BABCOCK UTILITIES LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 272.26	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	74.36
<b>TOTAL</b> This Period (last page this line number only) .....	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 11 / 55  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL CAMPBELL

Mailing Address 1960 HARTLAND ROAD

City State Zip Code  
APPLETON NY 14008

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

Name of Employer Occupation  
BABCOCK UTILITIES LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 289.14

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

**Transaction ID:** SA11AI.23519

Amount of Each Receipt this Period  
16.88

**B.**

Full Name (Last, First, Middle Initial)  
MICHAEL CAMPBELL

Mailing Address 1960 HARTLAND ROAD

City State Zip Code  
APPLETON NY 14008

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

Name of Employer Occupation  
BABCOCK UTILITIES LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

**Transaction ID:** SA11AI.23760

Amount of Each Receipt this Period  
29.48

**C.**

Full Name (Last, First, Middle Initial)  
JOHN CARAGLIN

Mailing Address 1356 ROSELLE AVENUE

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
AMERICAN WRECKING LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 283.50

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 7 / 1 7 / 2 0 0 7

**Transaction ID:** SA11AI.22028

Amount of Each Receipt this Period  
24.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **70.36**

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

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

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

FOR LINE NUMBER: PAGE 12 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
JOHN CARAGLIN  
 Mailing Address 1356 ROSELLE AVENUE  
 City State Zip Code  
 NIAGARA FALLS NY 14305  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 07 17 2007  
**Transaction ID:** SA11AI.22029  
 Amount of Each Receipt this Period  
 6.60  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AMERICAN WRECKING LABORER  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 290.10

**B.** Full Name (Last, First, Middle Initial)  
JOHN CARAGLIN  
 Mailing Address 1356 ROSELLE AVENUE  
 City State Zip Code  
 NIAGARA FALLS NY 14305  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 08 20 2007  
**Transaction ID:** SA11AI.22488  
 Amount of Each Receipt this Period  
 20.70  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AMERICAN WRECKING LABORER  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 310.80

**C.** Full Name (Last, First, Middle Initial)  
JOHN CARAGLIN  
 Mailing Address 1356 ROSELLE AVENUE  
 City State Zip Code  
 NIAGARA FALLS NY 14305  
 Date of Receipt  
 M M / D D / Y Y Y Y Y  
 09 19 2007  
**Transaction ID:** SA11AI.22770  
 Amount of Each Receipt this Period  
 24.45  
 FEC ID number of contributing federal political committee. **C**  
 Name of Employer Occupation  
 AMERICAN WRECKING LABORER  
 Receipt For: Aggregate Year-to-Date ▼  
 Primary  General  
 Other (specify) ▼ 335.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► 51.75  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 13 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
JOHN CARAGLIN

Mailing Address 1356 ROSELLE AVENUE

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
AMERICAN WRECKING LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 342.45

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 9 / 2 0 0 7

Transaction ID: SA11AI.23172

Amount of Each Receipt this Period  
7.20

**B.** Full Name (Last, First, Middle Initial)  
MARK CARAGLIN

Mailing Address 4645 MEADOWBROOK ST

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. CO. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.22855

Amount of Each Receipt this Period  
23.25

**C.** Full Name (Last, First, Middle Initial)  
MARK CARAGLIN

Mailing Address 4645 MEADOWBROOK ST

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. CO. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 243.25

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.23121

Amount of Each Receipt this Period  
21.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **51.45**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 14 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) MARK CARAGLIN		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 4645 MEADOWBROOK ST		<b>Transaction ID:</b> SA11AI.23391
City NIAGARA FALLS	State NY	Zip Code 14305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.78
Name of Employer JOHNSON, WALTER S. BLDG. CO.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 274.03	

**B.**

Full Name (Last, First, Middle Initial) MARK CARAGLIN		Date of Receipt MM / DD / YYYY 12 / 20 / 2007
Mailing Address 4645 MEADOWBROOK ST		<b>Transaction ID:</b> SA11AI.23745
City NIAGARA FALLS	State NY	Zip Code 14305
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 11.93
Name of Employer JOHNSON, WALTER S. BLDG. CO.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 285.96	

**C.**

Full Name (Last, First, Middle Initial) JOHN CARDINAL		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 4513 PLANK RD.		<b>Transaction ID:</b> SA11AI.23408
City LOCKPORT	State NY	Zip Code 14094
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.00
Name of Employer SCRUFARI CONSTRUCTION CO.-INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 219.74	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	66.71
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 15 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN CARDINAL		Date of Receipt																					
	Mailing Address 4513 PLANK RD.		<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>1</td><td>2</td><td>/</td><td>1</td><td>7</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	7	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2	/	1	7	/	2	0	0	7														
City	State	Zip Code	<b>Transaction ID:</b> SA11AI.23684																					
LOCKPORT	NY	14094	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		C	17.25																					
Name of Employer SCRUFARI CONSTRUCTION CO.-INC.		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	236.99																					

<b>B.</b>	Full Name (Last, First, Middle Initial) MARK CASE		Date of Receipt																					
	Mailing Address 8565 BUNKER HILL RD.		<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>9</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9	/	1	8	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9	/	1	8	/	2	0	0	7														
City	State	Zip Code	<b>Transaction ID:</b> SA11AI.22725																					
GASPORT	NY	14067	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		C	30.00																					
Name of Employer CASE BORING CORPORATION		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	208.80																					

<b>C.</b>	Full Name (Last, First, Middle Initial) MARK CASE		Date of Receipt																					
	Mailing Address 8565 BUNKER HILL RD.		<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>1</td><td>0</td><td>/</td><td>0</td><td>9</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0	/	0	9	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0	/	0	9	/	2	0	0	7														
City	State	Zip Code	<b>Transaction ID:</b> SA11AI.22974																					
GASPORT	NY	14067	Amount of Each Receipt this Period																					
FEC ID number of contributing federal political committee.		C	24.00																					
Name of Employer CASE BORING CORPORATION		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	232.80																					

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	71.25
<b>TOTAL</b> This Period (last page this line number only) .....	

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 16 / 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MARK CASE		Date of Receipt
	Mailing Address 8565 BUNKER HILL RD.		<input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	GASPORT	NY	14067
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> SA11AI.23199
Name of Employer CASE BORING CORPORATION		Occupation LABORER	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="262.80"/>	<input type="text" value="30.00"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) MARK CASE		Date of Receipt
	Mailing Address 8565 BUNKER HILL RD.		<input type="text" value="11"/> / <input type="text" value="14"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	GASPORT	NY	14067
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> SA11AI.23299
Name of Employer CASE BORING CORPORATION		Occupation LABORER	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="286.80"/>	<input type="text" value="24.00"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) MARK CASE		Date of Receipt
	Mailing Address 8565 BUNKER HILL RD.		<input type="text" value="12"/> / <input type="text" value="11"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	GASPORT	NY	14067
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID:</b> SA11AI.23594
Name of Employer CASE BORING CORPORATION		Occupation LABORER	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="316.80"/>	<input type="text" value="30.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="84.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 17 / 55
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12	
	<input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) DONALD CONNOR		Date of Receipt
	Mailing Address 3623 COOMER ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 1 / 1 4 / 2 0 0 7
	City	State	Zip Code
	NEWFANE	NY	14108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23302
Name of Employer EMPIRE DISMANTLEMENT CORP.		Occupation LABORER	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"/> 219.41	<input type="text"/> 26.10

<b>B.</b>	Full Name (Last, First, Middle Initial) DONALD CONNOR		Date of Receipt
	Mailing Address 3623 COOMER ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 0 6 / 2 0 0 7
	City	State	Zip Code
	NEWFANE	NY	14108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23561
Name of Employer EMPIRE DISMANTLEMENT CORP.		Occupation LABORER	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"/> 249.97	<input type="text"/> 30.56

<b>C.</b>	Full Name (Last, First, Middle Initial) DONALD CONNOR		Date of Receipt
	Mailing Address 3623 COOMER ROAD		<input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y 1 2 / 2 6 / 2 0 0 7
	City	State	Zip Code
	NEWFANE	NY	14108
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23766
Name of Employer EMPIRE DISMANTLEMENT CORP.		Occupation LABORER	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"/> 271.90	<input type="text"/> 21.93

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 78.59
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text"/>

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

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

FOR LINE NUMBER: PAGE 18 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
GARY COOK

Mailing Address 9032 CAYUGA DRIVE

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer: DULUTH ENVIRONMENTAL SERVICES  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 220.74

Date of Receipt: 09 / 10 / 2007  
**Transaction ID: SA11AI.22611**  
 Amount of Each Receipt this Period: 31.92

**B.** Full Name (Last, First, Middle Initial)  
GARY COOK

Mailing Address 9032 CAYUGA DRIVE

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer: DULUTH ENVIRONMENTAL SERVICES  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 257.98

Date of Receipt: 10 / 10 / 2007  
**Transaction ID: SA11AI.22995**  
 Amount of Each Receipt this Period: 37.24

**C.** Full Name (Last, First, Middle Initial)  
GARY COOK

Mailing Address 9032 CAYUGA DRIVE

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer: DULUTH ENVIRONMENTAL SERVICES  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 280.48

Date of Receipt: 11 / 09 / 2007  
**Transaction ID: SA11AI.23285**  
 Amount of Each Receipt this Period: 22.50

**SUBTOTAL** of Receipts This Page (optional) ..... ► 91.66

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 19 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 243.51

Date of Receipt

M M / D D / Y Y Y Y Y  
07 / 06 / 2007

Transaction ID: SA11AI.21857

Amount of Each Receipt this Period  
33.90

**B.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 275.50

Date of Receipt

M M / D D / Y Y Y Y Y  
08 / 10 / 2007

Transaction ID: SA11AI.22289

Amount of Each Receipt this Period  
31.99

**C.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 317.44

Date of Receipt

M M / D D / Y Y Y Y Y  
09 / 10 / 2007

Transaction ID: SA11AI.22612

Amount of Each Receipt this Period  
41.94

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

107.83

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

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

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

FOR LINE NUMBER: PAGE 20 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer SEVENSON ENVIRONMENTAL SVC Occupation LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 349.32

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 0 / 2 0 0 7

**Transaction ID:** SA11AI.22996

Amount of Each Receipt this Period  
31.88

**B.** Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer SEVENSON ENVIRONMENTAL SVC Occupation LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 391.70

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 9 / 2 0 0 7

**Transaction ID:** SA11AI.23286

Amount of Each Receipt this Period  
42.38

**C.** Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer SEVENSON ENVIRONMENTAL SVC Occupation LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 421.75

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 5 / 2 0 0 7

**Transaction ID:** SA11AI.23558

Amount of Each Receipt this Period  
30.05

**SUBTOTAL** of Receipts This Page (optional) ..... ► **104.31**

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

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

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

FOR LINE NUMBER: PAGE 21 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 205.43

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 04 / 2007

**Transaction ID:** SA11AI.23797

Amount of Each Receipt this Period  
27.20

**B.** Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 239.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
10 / 01 / 2007

**Transaction ID:** SA11AI.23799

Amount of Each Receipt this Period  
33.68

**C.** Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 259.33

Date of Receipt  
M M / D D / Y Y Y Y Y  
11 / 02 / 2007

**Transaction ID:** SA11AI.23802

Amount of Each Receipt this Period  
20.22

**SUBTOTAL** of Receipts This Page (optional) ..... ► **81.10**

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

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

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

FOR LINE NUMBER: PAGE 22 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 291.96

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 0 3 / 2 0 0 7

**Transaction ID:** SA11AI.23805

Amount of Each Receipt this Period  
32.63

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL GODZISZ

Mailing Address 8028 RIDGE ROAD

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
NORTHEAST CAISSONS, INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 219.04

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

**Transaction ID:** SA11AI.23103

Amount of Each Receipt this Period  
25.39

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

Mailing Address 8028 RIDGE ROAD

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
NORTHEAST CAISSONS, INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 226.17

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 2 3 / 2 0 0 7

**Transaction ID:** SA11AI.23198

Amount of Each Receipt this Period  
7.13

**SUBTOTAL** of Receipts This Page (optional) ..... ► **65.15**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 23 / 55  
(check only one)

<input checked="" type="checkbox"/>	11a	<input type="checkbox"/>	11b	<input type="checkbox"/>	11c	<input type="checkbox"/>	12	<input type="checkbox"/>	13	<input type="checkbox"/>	14	<input type="checkbox"/>	15	<input type="checkbox"/>	16	<input type="checkbox"/>	17
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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) MICHAEL GODZISZ		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 8028 RIDGE ROAD		<b>Transaction ID:</b> SA11AI.23372
City GASPORT	State Zip Code NY 14067	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 31.10
Name of Employer NORTHEAST CAISSONS, INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 257.27	

**B.**

Full Name (Last, First, Middle Initial) MICHAEL GODZISZ		Date of Receipt MM / DD / YYYY 12 / 18 / 2007
Mailing Address 8028 RIDGE ROAD		<b>Transaction ID:</b> SA11AI.23705
City GASPORT	State Zip Code NY 14067	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 32.25
Name of Employer NORTHEAST CAISSONS, INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 289.52	

**C.**

Full Name (Last, First, Middle Initial) ERIC GREEN		Date of Receipt MM / DD / YYYY 12 / 17 / 2007
Mailing Address 2457 WASHINGTON ST		<b>Transaction ID:</b> SA11AI.23665
City NIAGARA FALLS	State Zip Code NY 14304	
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 13.91
Name of Employer CRANE HOGAN STRUCTURAL SYS INC	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.50	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	77.26
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 24 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) ERIC GREEN		Date of Receipt																				
	Mailing Address 2457 WASHINGTON ST		<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>1</td><td>2</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	8	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2	/	1	8	/	2	0	0	7													
	City	State	Zip Code																				
NIAGARA FALLS	NY	14304																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23721																					
Name of Employer CRANE HOGAN STRUCTURAL SYS INC		Occupation LABORER	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 ▼	<table border="1"><tr><td>9.30</td></tr></table>	9.30																			
9.30																							
		<table border="1"><tr><td>219.80</td></tr></table>	219.80																				
219.80																							

<b>B.</b>	Full Name (Last, First, Middle Initial) GORDON R HASELEY JR		Date of Receipt																				
	Mailing Address 6667 DALE RD		<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>1</td><td>2</td><td>/</td><td>1</td><td>0</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2	/	1	0	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2	/	1	0	/	2	0	0	7													
	City	State	Zip Code																				
NEWFANE	NY	14108																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23586																					
Name of Employer 'TUGHILL CONSTRUCTION		Occupation INC.'	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 ▼	<table border="1"><tr><td>32.03</td></tr></table>	32.03																			
32.03																							
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212.40																							

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL HENLEY		Date of Receipt																				
	Mailing Address 8195 REMSEN RD		<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>7</td><td>/</td><td>1</td><td>8</td><td>/</td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	7	/	1	8	/	2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	7	/	1	8	/	2	0	0	7													
	City	State	Zip Code																				
AKRON	NY	14001																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.22159																					
Name of Employer ALDRIDGE ELECTRIC INC		Occupation LABORER	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 ▼	<table border="1"><tr><td>29.85</td></tr></table>	29.85																			
29.85																							
		<table border="1"><tr><td>223.80</td></tr></table>	223.80																				
223.80																							

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<table border="1"><tr><td>71.18</td></tr></table>	71.18
71.18		
<b>TOTAL</b> This Period (last page this line number only) .....	<table border="1"><tr><td> </td></tr></table>	

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

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

FOR LINE NUMBER: PAGE 25 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY  
 Mailing Address 8195 REMSEN RD  
 City AKRON State NY Zip Code 14001  
 Date of Receipt 08 / 15 / 2007  
 Transaction ID: SA11AI.22345  
 Amount of Each Receipt this Period 37.31  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ALDRIDGE ELECTRIC INC Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 261.11

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY  
 Mailing Address 8195 REMSEN RD  
 City AKRON State NY Zip Code 14001  
 Date of Receipt 09 / 17 / 2007  
 Transaction ID: SA11AI.22648  
 Amount of Each Receipt this Period 29.85  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ALDRIDGE ELECTRIC INC Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 290.96

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY  
 Mailing Address 8195 REMSEN RD  
 City AKRON State NY Zip Code 14001  
 Date of Receipt 10 / 15 / 2007  
 Transaction ID: SA11AI.23035  
 Amount of Each Receipt this Period 37.31  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ALDRIDGE ELECTRIC INC Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 328.27

**SUBTOTAL** of Receipts This Page (optional) ..... ► 104.47  
**TOTAL** This Period (last page this line number only) ..... ►

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:	PAGE 26 / 55
	(check only one)	
<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15
<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MICHAEL HENLEY		Date of Receipt																					
	Mailing Address 8195 REMSEN RD		<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>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	1		1	5		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	1		1	5		2	0	0	7														
	City State Zip Code AKRON NY 14001		<b>Transaction ID:</b> SA11AI.23323																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 29.85																						
Name of Employer Occupation ALDRIDGE ELECTRIC INC LABORER		Aggregate Year-to-Date ▼ 358.12																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL HENLEY		Date of Receipt																					
	Mailing Address 8195 REMSEN RD		<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>1</td><td>2</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	2		1	7		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	2		1	7		2	0	0	7														
	City State Zip Code AKRON NY 14001		<b>Transaction ID:</b> SA11AI.23658																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 29.85																						
Name of Employer Occupation ALDRIDGE ELECTRIC INC LABORER		Aggregate Year-to-Date ▼ 387.97																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>C.</b>	Full Name (Last, First, Middle Initial) DANIEL HENWOOD		Date of Receipt																					
	Mailing Address 8936 CHAMPLAIN 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>1</td><td>0</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	1	0		0	9		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y														
	1	0		0	9		2	0	0	7														
	City State Zip Code NIAGARA FALLS NY 14304		<b>Transaction ID:</b> SA11AI.22977																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 38.21																						
Name of Employer Occupation MILLAWN LANDSCAPING LABORER		Aggregate Year-to-Date ▼ 227.47																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																								

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	97.91
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

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

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

FOR LINE NUMBER: PAGE 27 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
DANIEL HENWOOD

Mailing Address 8936 CHAMPLAIN AVE

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
MILLAWN LANDSCAPING LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 268.01

Date of Receipt  
MM / DD / YYYY  
11 / 08 / 2007

**Transaction ID:** SA11AI.23263

Amount of Each Receipt this Period  
40.54

**B.** Full Name (Last, First, Middle Initial)  
DANIEL HENWOOD

Mailing Address 8936 CHAMPLAIN AVE

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
MILLAWN LANDSCAPING LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 295.83

Date of Receipt  
MM / DD / YYYY  
12 / 17 / 2007

**Transaction ID:** SA11AI.23666

Amount of Each Receipt this Period  
27.82

**C.** Full Name (Last, First, Middle Initial)  
DARIN JUDWARE

Mailing Address 1775 UPPER MT. RD.

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
CATCO LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 207.34

Date of Receipt  
MM / DD / YYYY  
08 / 09 / 2007

**Transaction ID:** SA11AI.22266

Amount of Each Receipt this Period  
35.48

**SUBTOTAL** of Receipts This Page (optional) ..... ► **103.84**

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

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

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

FOR LINE NUMBER: PAGE 28 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
DARIN JUDWARE  
Mailing Address 1775 UPPER MT. RD.  
City LEWISTON State NY Zip Code 14092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CATCO Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 252.76  
Date of Receipt 09 / 17 / 2007  
Transaction ID: SA11AI.22666  
Amount of Each Receipt this Period 45.42

**B.** Full Name (Last, First, Middle Initial)  
DARIN JUDWARE  
Mailing Address 1775 UPPER MT. RD.  
City LEWISTON State NY Zip Code 14092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CATCO Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 288.72  
Date of Receipt 10 / 11 / 2007  
Transaction ID: SA11AI.23011  
Amount of Each Receipt this Period 35.96

**C.** Full Name (Last, First, Middle Initial)  
DARIN JUDWARE  
Mailing Address 1775 UPPER MT. RD.  
City LEWISTON State NY Zip Code 14092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CATCO Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 321.76  
Date of Receipt 11 / 15 / 2007  
Transaction ID: SA11AI.23337  
Amount of Each Receipt this Period 33.04

**SUBTOTAL** of Receipts This Page (optional) ..... ► 114.42  
**TOTAL** This Period (last page this line number only) ..... ►

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

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

FOR LINE NUMBER: PAGE 29 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
DARIN JUDWARE  
Mailing Address 1775 UPPER MT. RD.  
City LEWISTON State NY Zip Code 14092  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CATCO Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 344.82  
Date of Receipt 12 / 14 / 2007  
Transaction ID: SA11AI.23636  
Amount of Each Receipt this Period 23.06

**B.** Full Name (Last, First, Middle Initial)  
PETER KACZOWSKI  
Mailing Address 2422 MICHIGAN AVENUE  
City NIAGARA FALLS State NY Zip Code 14305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WILSON RESTORATION & WATER- Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 202.50  
Date of Receipt 11 / 02 / 2007  
Transaction ID: SA11AI.23222  
Amount of Each Receipt this Period 21.47

**C.** Full Name (Last, First, Middle Initial)  
PETER KACZOWSKI  
Mailing Address 2422 MICHIGAN AVENUE  
City NIAGARA FALLS State NY Zip Code 14305  
FEC ID number of contributing federal political committee. **C**  
Name of Employer WILSON RESTORATION & WATER- Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 203.70  
Date of Receipt 11 / 19 / 2007  
Transaction ID: SA11AI.23447  
Amount of Each Receipt this Period 1.20

**SUBTOTAL** of Receipts This Page (optional) ..... ► 45.73  
**TOTAL** This Period (last page this line number only) ..... ►

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 30 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) PETER KACZOWSKI		Date of Receipt																				
	Mailing Address 2422 MICHIGAN 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>1</td><td>2</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	1	2		0	3		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	1	2		0	3		2	0	0	7													
	City	State	Zip Code																				
NIAGARA FALLS	NY	14305																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23533																					
Name of Employer WILSON RESTORATION & WATER-		Occupation LABORER	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 ▼ 235.47	31.77																				

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt																				
	Mailing Address 4010 CLIFF 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>8</td><td></td><td>2</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	8		2	1		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	8		2	1		2	0	0	7													
	City	State	Zip Code																				
NIAGARA FALLS	NY	14305																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.22509																					
Name of Employer JOHNSON, WALTER S. BLDG. CO.		Occupation LABORER	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 ▼ 201.48	23.03																				

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt																				
	Mailing Address 4010 CLIFF 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>9</td><td></td><td>2</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	9		2	6		2	0	0	7
	M	M	/	D	D	/	Y	Y	Y	Y													
	0	9		2	6		2	0	0	7													
	City	State	Zip Code																				
NIAGARA FALLS	NY	14305																					
FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.22859																					
Name of Employer JOHNSON, WALTER S. BLDG. CO.		Occupation LABORER	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 ▼ 220.68	19.20																				

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	74.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 31 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt	
	Mailing Address 4010 CLIFF STREET		M M / D D / Y Y Y Y Y 1 0 / 1 6 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.23124
	NIAGARA FALLS	NY	14305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		23.15	
Name of Employer JOHNSON, WALTER S. BLDG. CO.		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 243.83		

<b>B.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt	
	Mailing Address 4010 CLIFF STREET		M M / D D / Y Y Y Y Y 1 1 / 1 6 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.23396
	NIAGARA FALLS	NY	14305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		32.13	
Name of Employer JOHNSON, WALTER S. BLDG. CO.		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 275.96		

<b>C.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt	
	Mailing Address 4010 CLIFF STREET		M M / D D / Y Y Y Y Y 1 2 / 2 0 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.23747
	NIAGARA FALLS	NY	14305	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		16.05	
Name of Employer JOHNSON, WALTER S. BLDG. CO.		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 292.01		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	71.33
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 32 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL P MC CABE

Mailing Address 4371 MACK AVENUE

City State Zip Code  
GASPORT NY 14067

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

Name of Employer 'BABCOCK UTILITIES' Occupation INC.

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.34

Date of Receipt  
MM / DD / YYYY  
12 / 21 / 2007

Transaction ID: SA11AI.23761

Amount of Each Receipt this Period  
27.71

**B.**

Full Name (Last, First, Middle Initial)  
ANDREW MESS

Mailing Address 215 MOHAWK STREET

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer CRANE-HOGAN STRUCTURAL SY-S.INC Occupation LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.92

Date of Receipt  
MM / DD / YYYY  
11 / 16 / 2007

Transaction ID: SA11AI.23419

Amount of Each Receipt this Period  
16.12

**C.**

Full Name (Last, First, Middle Initial)  
ANDREW MESS

Mailing Address 215 MOHAWK STREET

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer CRANE-HOGAN STRUCTURAL SY-S.INC Occupation LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 230.52

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2007

Transaction ID: SA11AI.23543

Amount of Each Receipt this Period  
15.60

**SUBTOTAL** of Receipts This Page (optional) ..... ► **59.43**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 33 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
ANDREW MESS

Mailing Address 215 MOHAWK STREET

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer  
CRANE-HOGAN STRUCTURAL SY-S, INC

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
239.48

Date of Receipt

M M / D D / Y Y Y Y  
12 / 17 / 2007

Transaction ID: SA11AI.23696

Amount of Each Receipt this Period

8.96

**B.**

Full Name (Last, First, Middle Initial)  
TODD MORGAN

Mailing Address 159 GREENWOOD CIRCLE

City State Zip Code  
NORTH TONAWANDA NY 14120

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

Name of Employer  
AMERICAN WRECKING

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
269.40

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2007

Transaction ID: SA11AI.22033

Amount of Each Receipt this Period

24.00

**C.**

Full Name (Last, First, Middle Initial)  
TODD MORGAN

Mailing Address 159 GREENWOOD CIRCLE

City State Zip Code  
NORTH TONAWANDA NY 14120

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

Name of Employer  
AMERICAN WRECKING

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
275.40

Date of Receipt

M M / D D / Y Y Y Y  
07 / 17 / 2007

Transaction ID: SA11AI.22034

Amount of Each Receipt this Period

6.00

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

38.96

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 34 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) TODD MORGAN		Date of Receipt
	Mailing Address 159 GREENWOOD CIRCLE		<input type="text" value="08"/> / <input type="text" value="20"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	NORTH TONAWANDA	NY	14120
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.22489
Name of Employer AMERICAN WRECKING		Occupation LABORER	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="287.10"/>	<input type="text" value="11.70"/>

<b>B.</b>	Full Name (Last, First, Middle Initial) TODD MORGAN		Date of Receipt
	Mailing Address 159 GREENWOOD CIRCLE		<input type="text" value="09"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	NORTH TONAWANDA	NY	14120
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.22771
Name of Employer AMERICAN WRECKING		Occupation LABORER	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="311.55"/>	<input type="text" value="24.45"/>

<b>C.</b>	Full Name (Last, First, Middle Initial) TODD MORGAN		Date of Receipt
	Mailing Address 159 GREENWOOD CIRCLE		<input type="text" value="10"/> / <input type="text" value="19"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	NORTH TONAWANDA	NY	14120
	FEC ID number of contributing federal political committee. <b>C</b>		<b>Transaction ID:</b> SA11AI.23173
Name of Employer AMERICAN WRECKING		Occupation LABORER	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="314.25"/>	<input type="text" value="2.70"/>

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

**38.85**

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

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

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

FOR LINE NUMBER: PAGE 35 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
MARSHALL OLDHAM

Mailing Address 1306 FALLS STREET

City State Zip Code  
NIAGARA FALLS NY 14303-1541

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

Name of Employer Occupation  
NORTHEAST CAISSONS, INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 219.43

Date of Receipt  
MM / DD / YYYY  
12 / 03 / 2007

Transaction ID: SA11AI.23535

Amount of Each Receipt this Period  
35.40

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL PALLADINO

Mailing Address 7154 ELLICOTT ROAD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
MADER CONSTRUCTION CO., INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
MM / DD / YYYY  
08 / 21 / 2007

Transaction ID: SA11AI.22517

Amount of Each Receipt this Period  
24.00

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

Mailing Address 7154 ELLICOTT ROAD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
MADER CONSTRUCTION CO., INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
MM / DD / YYYY  
09 / 24 / 2007

Transaction ID: SA11AI.22837

Amount of Each Receipt this Period  
30.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► 89.40

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

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

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

FOR LINE NUMBER: PAGE 36 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
MICHAEL PALLADINO

Mailing Address 7154 ELLICOTT ROAD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
MADER CONSTRUCTION CO., INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.23072

Amount of Each Receipt this Period  
24.00

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL PALLADINO

Mailing Address 7154 ELLICOTT ROAD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
MADER CONSTRUCTION CO., INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 288.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 0 2 / 2 0 0 7

**Transaction ID:** SA11AI.23231

Amount of Each Receipt this Period  
30.00

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

Mailing Address 7154 ELLICOTT ROAD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
MADER CONSTRUCTION CO., INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 312.00

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** SA11AI.23648

Amount of Each Receipt this Period  
24.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **78.00**

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

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

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

FOR LINE NUMBER: PAGE 37 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
RICHARD PALLADINO

Mailing Address 7657 HIGHLAND DRIVE

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
LANAKI DEV. CORP. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 204.00

Date of Receipt  
MM / DD / YYYY  
08 / 06 / 2007

**Transaction ID:** SA11AI.22239

Amount of Each Receipt this Period  
24.00

**B.** Full Name (Last, First, Middle Initial)  
RICHARD PALLADINO

Mailing Address 7657 HIGHLAND DRIVE

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
LANAKI DEV. CORP. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 234.00

Date of Receipt  
MM / DD / YYYY  
09 / 05 / 2007

**Transaction ID:** SA11AI.22555

Amount of Each Receipt this Period  
30.00

**C.** Full Name (Last, First, Middle Initial)  
RICHARD PALLADINO

Mailing Address 7657 HIGHLAND DRIVE

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
LANAKI DEV. CORP. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 258.00

Date of Receipt  
MM / DD / YYYY  
10 / 03 / 2007

**Transaction ID:** SA11AI.22934

Amount of Each Receipt this Period  
24.00

**SUBTOTAL** of Receipts This Page (optional) ..... ► **78.00**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 38 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

A.

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

Mailing Address 7657 HIGHLAND DRIVE

City	State	Zip Code
GASPORT	NY	14067

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

Name of Employer LANAKI DEV. CORP.	Occupation LABORER
---------------------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 288.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 1 / 0 2 / 2 0 0 7

Transaction ID: SA11AI.23227

Amount of Each Receipt this Period  
30.00

B.

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

Mailing Address 7657 HIGHLAND DRIVE

City	State	Zip Code
GASPORT	NY	14067

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

Name of Employer LANAKI DEV. CORP.	Occupation LABORER
---------------------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 312.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 0 5 / 2 0 0 7

Transaction ID: SA11AI.23554

Amount of Each Receipt this Period  
24.00

C.

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

Mailing Address 7657 HIGHLAND DRIVE

City	State	Zip Code
GASPORT	NY	14067

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

Name of Employer LANAKI DEV. CORP.	Occupation LABORER
---------------------------------------	-----------------------

Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00
---	------------------------------------

Date of Receipt

M M / D D / Y Y Y Y Y
1 2 / 2 8 / 2 0 0 7

Transaction ID: SA11AI.23791

Amount of Each Receipt this Period  
24.00

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

78.00

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 39 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) DONALD RALPH		Date of Receipt MM / DD / YYYY 10 / 22 / 2007
Mailing Address 10795 LAKESHORE RD		<b>Transaction ID:</b> SA11AI.23178
City LYNDONVILLE	State NY	Zip Code 14098
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 36.41
Name of Employer BABCOCK UTILITIES, INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 207.42	

**B.**

Full Name (Last, First, Middle Initial) DONALD RALPH		Date of Receipt MM / DD / YYYY 11 / 05 / 2007
Mailing Address 10795 LAKESHORE RD		<b>Transaction ID:</b> SA11AI.23236
City LYNDONVILLE	State NY	Zip Code 14098
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 28.61
Name of Employer BABCOCK UTILITIES, INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 236.03	

**C.**

Full Name (Last, First, Middle Initial) DONALD RALPH		Date of Receipt MM / DD / YYYY 12 / 03 / 2007
Mailing Address 10795 LAKESHORE RD		<b>Transaction ID:</b> SA11AI.23521
City LYNDONVILLE	State NY	Zip Code 14098
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 37.88
Name of Employer BABCOCK UTILITIES, INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 273.91	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	102.90
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 40 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

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

Mailing Address 10795 LAKESHORE RD

City State Zip Code  
LYNDONVILLE NY 14098

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

Name of Employer Occupation  
BABCOCK UTILITIES, INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 300.84

Date of Receipt

M M / D D / Y Y Y Y Y  
1 2 / 2 1 / 2 0 0 7

Transaction ID: SA11AI.23763

Amount of Each Receipt this Period

26.93

**B.**

Full Name (Last, First, Middle Initial)  
LAWRENCE ROBINSON III

Mailing Address 6019 GRAUER RD

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. CO. LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 221.48

Date of Receipt

M M / D D / Y Y Y Y Y  
0 9 / 2 6 / 2 0 0 7

Transaction ID: SA11AI.22862

Amount of Each Receipt this Period

23.40

**C.**

Full Name (Last, First, Middle Initial)  
LAWRENCE ROBINSON III

Mailing Address 6019 GRAUER RD

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. CO. LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 243.98

Date of Receipt

M M / D D / Y Y Y Y Y  
1 0 / 1 6 / 2 0 0 7

Transaction ID: SA11AI.23127

Amount of Each Receipt this Period

22.50

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

72.83

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 41 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
LAWRENCE ROBINSON III

Mailing Address 6019 GRAUER RD

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer  
JOHNSON, WALTER S. BLDG. CO.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
271.81

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1	/	1	6	/	2	0	0	7

Transaction ID: SA11AI.23399

Amount of Each Receipt this Period

27.83
-------

**B.**

Full Name (Last, First, Middle Initial)  
LAWRENCE ROBINSON III

Mailing Address 6019 GRAUER RD

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer  
JOHNSON, WALTER S. BLDG. CO.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
295.36

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2	/	2	0	/	2	0	0	7

Transaction ID: SA11AI.23749

Amount of Each Receipt this Period

23.55
-------

**C.**

Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer  
SCRUFARI CONSTRUCTION CO.-INC.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
206.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9	/	1	7	/	2	0	0	7

Transaction ID: SA11AI.22705

Amount of Each Receipt this Period

30.00
-------

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

81.38

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

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

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

FOR LINE NUMBER: PAGE 42 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer: SCRUFARI CONSTRUCTION CO.-, INC.  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
200.07

Date of Receipt: 09 / 17 / 2007  
**Transaction ID: SA11AI.22706**  
 Amount of Each Receipt this Period: -6.00

**B.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer: SCRUFARI CONSTRUCTION CO.-, INC.  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
208.47

Date of Receipt: 10 / 12 / 2007  
**Transaction ID: SA11AI.23032**  
 Amount of Each Receipt this Period: 8.40

**C.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer: SCRUFARI CONSTRUCTION CO.-, INC.  
Occupation: LABORER

Receipt For:  
 Primary    General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
216.87

Date of Receipt: 11 / 13 / 2007  
**Transaction ID: SA11AI.23287**  
 Amount of Each Receipt this Period: 8.40

**SUBTOTAL** of Receipts This Page (optional) ..... ► **10.80**

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

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

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

FOR LINE NUMBER: PAGE 43 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
SCRUFARI CONSTRUCTION CO.- INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 222.31

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.23328

Amount of Each Receipt this Period  
5.44

**B.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY. NORTH

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
SCRUFARI CONSTRUCTION CO.- INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 227.11

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.23360

Amount of Each Receipt this Period  
4.80

**C.** Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
OAKGROVE CONSTRUCTION, IN- C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.34

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 8 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.22381

Amount of Each Receipt this Period  
20.41

**SUBTOTAL** of Receipts This Page (optional) ..... ► **30.65**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 44 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer  
OAKGROVE CONSTRUCTION, IN-C.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
230.62

Date of Receipt

M M / D D / Y Y Y Y  
09 / 17 / 2007

Transaction ID: SA11AI.22672

Amount of Each Receipt this Period

19.28

**B.**

Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer  
OAKGROVE CONSTRUCTION, IN-C.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
240.22

Date of Receipt

M M / D D / Y Y Y Y  
09 / 18 / 2007

Transaction ID: SA11AI.22739

Amount of Each Receipt this Period

9.60

**C.**

Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer  
OAKGROVE CONSTRUCTION, IN-C.

Occupation  
LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
272.66

Date of Receipt

M M / D D / Y Y Y Y  
10 / 11 / 2007

Transaction ID: SA11AI.23018

Amount of Each Receipt this Period

32.44

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

61.32

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

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

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

FOR LINE NUMBER: PAGE 45 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
OAKGROVE CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 306.15

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.23342

Amount of Each Receipt this Period  
33.49

**B.** Full Name (Last, First, Middle Initial)  
MATT SCHIAVI

Mailing Address 649 SARA COURT

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
OAKGROVE CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 324.90

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** SA11AI.23641

Amount of Each Receipt this Period  
18.75

**C.** Full Name (Last, First, Middle Initial)  
GREG STRASSEL

Mailing Address 7120 RIDGEWOOD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
YARUSSI CONSTRUCTION INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 211.26

Date of Receipt  
M M / D D / Y Y Y Y Y  
0 9 / 1 7 / 2 0 0 7

**Transaction ID:** SA11AI.22674

Amount of Each Receipt this Period  
33.75

**SUBTOTAL** of Receipts This Page (optional) ..... ► **85.99**

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

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

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

FOR LINE NUMBER: PAGE 46 / 55

(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
GREG STRASSEL

Mailing Address 7120 RIDGEWOOD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
YARUSSI CONSTRUCTION INC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
246.51

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	1		2	0	0	7

Transaction ID: SA11AI.23020

Amount of Each Receipt this Period

35.25
-------

**B.**

Full Name (Last, First, Middle Initial)  
GREG STRASSEL

Mailing Address 7120 RIDGEWOOD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
YARUSSI CONSTRUCTION INC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
278.24

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	5		2	0	0	7

Transaction ID: SA11AI.23345

Amount of Each Receipt this Period

31.73
-------

**C.**

Full Name (Last, First, Middle Initial)  
GREG STRASSEL

Mailing Address 7120 RIDGEWOOD

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
YARUSSI CONSTRUCTION INC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼  
301.49

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
1	2		1	4		2	0	0	7

Transaction ID: SA11AI.23643

Amount of Each Receipt this Period

23.25
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**SUBTOTAL** of Receipts This Page (optional) .....

90.23
-------

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

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

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

FOR LINE NUMBER: PAGE 47 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
ANTHONY TOBIN

Mailing Address 273 CRESTWOOD AVENUE

City State Zip Code  
BUFFALO NY 14216

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

Name of Employer Occupation  
CATCO LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 217.08

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 0 / 1 1 / 2 0 0 7

**Transaction ID:** SA11AI.23024

Amount of Each Receipt this Period  
37.02

**B.** Full Name (Last, First, Middle Initial)  
ANTHONY TOBIN

Mailing Address 273 CRESTWOOD AVENUE

City State Zip Code  
BUFFALO NY 14216

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

Name of Employer Occupation  
CATCO LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 251.59

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 1 / 1 5 / 2 0 0 7

**Transaction ID:** SA11AI.23348

Amount of Each Receipt this Period  
34.51

**C.** Full Name (Last, First, Middle Initial)  
ANTHONY TOBIN

Mailing Address 273 CRESTWOOD AVENUE

City State Zip Code  
BUFFALO NY 14216

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

Name of Employer Occupation  
CATCO LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 262.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
1 2 / 1 4 / 2 0 0 7

**Transaction ID:** SA11AI.23645

Amount of Each Receipt this Period  
11.03

**SUBTOTAL** of Receipts This Page (optional) ..... ► **82.56**

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

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 48 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) MICHAEL TULINO		Date of Receipt MM / DD / YYYY 09 / 18 / 2007
Mailing Address 508 72ND. STREET		<b>Transaction ID:</b> SA11AI.22757
City NIAGARA FALLS	State NY	Zip Code 14304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 30.94
Name of Employer SCRUFARI CONSTRUCTION CO.- .INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 203.22	

**B.**

Full Name (Last, First, Middle Initial) MICHAEL TULINO		Date of Receipt MM / DD / YYYY 10 / 16 / 2007
Mailing Address 508 72ND. STREET		<b>Transaction ID:</b> SA11AI.23136
City NIAGARA FALLS	State NY	Zip Code 14304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.13
Name of Employer SCRUFARI CONSTRUCTION CO.- .INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.35	

**C.**

Full Name (Last, First, Middle Initial) MICHAEL TULINO		Date of Receipt MM / DD / YYYY 11 / 16 / 2007
Mailing Address 508 72ND. STREET		<b>Transaction ID:</b> SA11AI.23416
City NIAGARA FALLS	State NY	Zip Code 14304
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 19.28
Name of Employer SCRUFARI CONSTRUCTION CO.- .INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 241.63	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	69.35
<b>TOTAL</b> This Period (last page this line number only) .....	▶	

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 49 / 55  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) MICHAEL TULINO		Date of Receipt MM / DD / YYYY 12 / 17 / 2007
Mailing Address 508 72ND. STREET		<b>Transaction ID:</b> SA11AI.23692
City NIAGARA FALLS	State NY	Zip Code 14304
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 24.79
Name of Employer SCRUFARI CONSTRUCTION CO.-INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 266.42	

**B.**

Full Name (Last, First, Middle Initial) KARL WALKER		Date of Receipt MM / DD / YYYY 09 / 13 / 2007
Mailing Address 5278 BRIDGEMAN RD.		<b>Transaction ID:</b> SA11AI.22639
City SANBORN	State NY	Zip Code 14132
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 31.21
Name of Employer CERRONE, MARK INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.76	

**C.**

Full Name (Last, First, Middle Initial) KARL WALKER		Date of Receipt MM / DD / YYYY 09 / 13 / 2007
Mailing Address 5278 BRIDGEMAN RD.		<b>Transaction ID:</b> SA11AI.22640
City SANBORN	State NY	Zip Code 14132
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 27.46
Name of Employer CERRONE, MARK INC.	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 251.22	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>83.46</b>
<b>TOTAL</b> This Period (last page this line number only) .....	

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

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

FOR LINE NUMBER: PAGE 50 / 55  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
KARL WALKER  
Mailing Address 5278 BRIDGEMAN RD.  
City SANBORN State NY Zip Code 14132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CERRONE, MARK INC. Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 258.42  
Date of Receipt 12 / 03 / 2007  
Transaction ID: SA11AI.23537  
Amount of Each Receipt this Period 7.20

**B.** Full Name (Last, First, Middle Initial)  
KARL WALKER  
Mailing Address 5278 BRIDGEMAN RD.  
City SANBORN State NY Zip Code 14132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CERRONE, MARK INC. Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 259.55  
Date of Receipt 12 / 13 / 2007  
Transaction ID: SA11AI.23618  
Amount of Each Receipt this Period 1.13

**C.** Full Name (Last, First, Middle Initial)  
KARL WALKER  
Mailing Address 5278 BRIDGEMAN RD.  
City SANBORN State NY Zip Code 14132  
FEC ID number of contributing federal political committee. **C**  
Name of Employer CERRONE, MARK INC. Occupation LABORER  
Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 262.18  
Date of Receipt 12 / 18 / 2007  
Transaction ID: SA11AI.23727  
Amount of Each Receipt this Period 2.63

**SUBTOTAL** of Receipts This Page (optional) ..... ► 10.96  
**TOTAL** This Period (last page this line number only) ..... ► 3188.45

**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)

PAGE 51 / 55

<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
LIPSITZ, GREEN, SCIME, CAMBRIA, LLP

Mailing Address 42 DELAWARE AVE

City BUFFALO State NY Zip Code 14202

Purpose of Disbursement  
RETAINER FEES - LEGAL SERVICES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB21B.21795

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
SIMPSON, KLING, ET. AL

Mailing Address 345 THIRD STREET  
SUITE 512

City NIAGARA FALLS State NY Zip Code 14303

Purpose of Disbursement  
ACCOUNTING SERVICES

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

**Transaction ID:** SB21B.21798

Date of Disbursement

/  /

Amount of Each Disbursement this Period

**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"/> 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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ERNEST C. PALMER</p> <p>Mailing Address 4351 LOWER RIVER ROAD</p> <p>City YOUNGSTOWN State NY Zip Code 14174</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21823</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="9"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Committee to Elect Maria A. Massaro</p> <p>Mailing Address MPO Box 694</p> <p>City Niagara Falls State NY Zip Code 14302</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21810</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="0"/> <input type="text" value="6"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) Committee to Elect Maria A. Massaro</p> <p>Mailing Address MPO Box 694</p> <p>City Niagara Falls State NY Zip Code 14302</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21831</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="2"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="0"/> <input type="text" value="7"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>

**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"/> 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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT SAMUEL CONTI, JR.</p> <p>Mailing Address 2557 NICOLE DRIVE</p> <p>City NIAGARA FALLS State NY Zip Code 14304</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21820</p> <p>Date of Disbursement</p> <p><input type="text" value="09"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT STEVE FOURNIER</p> <p>Mailing Address 8925 CHAMPLAIN AVE</p> <p>City NIAGARA FALLS State NY Zip Code 14304</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21817</p> <p>Date of Disbursement</p> <p><input type="text" value="08"/> <input type="text" value="31"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="600.00"/></p> <p><input type="text" value="011"/> Category/Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) friends of Bill Caso</p> <p>Mailing Address 1351 - 101st Street</p> <p>City Niagara Falls State NY Zip Code 14304</p> <p>Purpose of Disbursement POLITICAL CONTRIBUTION</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><b>Transaction ID:</b> SB29.21805</p> <p>Date of Disbursement</p> <p><input type="text" value="07"/> <input type="text" value="05"/> / <input type="text" value="20"/> <input type="text" value="07"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="1000.00"/></p> <p><input type="text" value="011"/> Category/Type</p>

**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"/> 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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

A.	Full Name (Last, First, Middle Initial) Friends of James Budde	Transaction ID: SB29.21829 Date of Disbursement
	Mailing Address 7665 Highland Drive	<input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/>
	City Lockport State NY Zip Code 14067	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="700.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

B.	Full Name (Last, First, Middle Initial) FRIENDS OF JASON MURGIA	Transaction ID: SB29.21806 Date of Disbursement
	Mailing Address 1217 MAIN ST	<input type="text" value="07"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
	City NIAGARA FALLS State NY Zip Code 14301	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="1000.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

C.	Full Name (Last, First, Middle Initial) Friends of Nick Ligammari for City Council	Transaction ID: SB29.21814 Date of Disbursement
	Mailing Address 2439 Cleveland Avenue	<input type="text" value="08"/> / <input type="text" value="24"/> / <input type="text" value="2007"/>
	City Niagara Falls State NY Zip Code 14305	Amount of Each Disbursement this Period
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<input type="text" value="500.00"/>
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

**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"/> 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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
LEWISTON REPUBLICAN COMMITTEE

Mailing Address BOX 59

City LEWISTON State NY Zip Code 14092

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.21826

Date of Disbursement

10 / 01 / 2007

Amount of Each Disbursement this Period

600.00

**B.** Full Name (Last, First, Middle Initial)  
Maziarz State Senate

Mailing Address P.O. Box 454

City Lockport State NY Zip Code 14095

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.21812

Date of Disbursement

07 / 30 / 2007

Amount of Each Disbursement this Period

3000.00

**C.** Full Name (Last, First, Middle Initial)  
SENATE REPUBLICAN COMMITTEE

Mailing Address P.O. BOX 7229

City ALBANY State NY Zip Code 12224

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.21833

Date of Disbursement

11 / 13 / 2007

Amount of Each Disbursement this Period

10000.00

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

13600.00

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

19400.00