

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC

ADDRESS (number and street) 12298 Townsend Road
Check if different than previously reported. (ACC) Philadelphia PA 19154

2. FEC IDENTIFICATION NUMBER C C00174847
3. IS THIS REPORT NEW (N) OR AMENDED (A) [X] NEW (N) OR AMENDED (A)

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

5. Covering Period 07 / 01 / 2020 through 09 / 30 / 2020

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 Grace, Daniel, H, ,

Signature of Treasurer Grace, Daniel, H, , [Electronically Filed] Date 10 / 08 / 2020

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Page 2

Write or Type Committee Name

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2020"/>		157746.18
(b) Cash on Hand at Beginning of Reporting Period.....	163934.85	
(c) Total Receipts (from Line 19) .....	12783.85	41062.73
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	176718.70	198808.91
7. Total Disbursements (from Line 31).....	24132.35	46222.56
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	152586.35	152586.35
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

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

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

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	0.00	0.00
(ii) Unitemized .....	12781.00	41055.50
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	12781.00	41055.50
(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) .....	12781.00	41055.50
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.).....	2.85	7.23
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	12783.85	41062.73
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	12783.85	41062.73

**DETAILED SUMMARY PAGE**  
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3882.35	9359.56
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3882.35	9359.56
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 Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	3.00
(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	3.00
29. Other Disbursements (Including Non-Federal Donations).....	20250.00	36860.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) .....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	24132.35	46222.56
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	24132.35	46222.56

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

<b>III. Net Contributions/ Operating Expenditures</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	12781.00	41055.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	3.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	12781.00	41052.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3882.35	9359.56
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3882.35	9359.56

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

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

FOR LINE NUMBER:  
(check only one)

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

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

**A. Teamsters Local Union No. 830**

Mailing Address 12298 Townsend Road

City Philadelphia State PA Zip Code 19154

Purpose of Disbursement Reimburse for PAC admin work-05,06,07/2020

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2020

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.5500**  
 Amount of Each Disbursement this Period  
 [ ] 3085.55

Memo Item

Full Name (Last, First, Middle Initial)

**B. Teamsters Local Union No. 830**

Mailing Address 12298 Townsend Road

City Philadelphia State PA Zip Code 19154

Purpose of Disbursement Reimburse for PAC admon work-08/2020

Candidate Name

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

Date of Disbursement

MM / DD / YYYY  
09 / 23 / 2020

FEC Identification Number

C [ ]  
**Transaction ID : SB21B.5501**  
 Amount of Each Disbursement this Period  
 [ ] 787.80

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

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

Date of Disbursement

MM / DD / YYYY

FEC Identification Number

C [ ]  
 Amount of Each Disbursement this Period  
 [ ]

Memo Item

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

[ ] 3873.35

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

[ ] 3873.35

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial) <b>A. Citizens for Dan Williams</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2020	
Mailing Address P.O. Box 72162		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5495</b> Amount of Each Disbursement this Period 500.00	
City Thorndale	State PA	Zip Code 19372-0162	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>B. Elect Gary Spillane</b>		Date of Disbursement MM / DD / YYYY 08 / 26 / 2020	
Mailing Address P.O. Box 34		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5484</b> Amount of Each Disbursement this Period 500.00	
City Chalfont	State PA	Zip Code 18914	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) <b>C. Elect Joe Hohenstein PAC</b>		Date of Disbursement MM / DD / YYYY 08 / 05 / 2020	
Mailing Address 190 N. Independence Mall West Suite 602		FEC Identification Number C [REDACTED] <b>Transaction ID : SB29.5474</b> Amount of Each Disbursement this Period 500.00	
City Philadelphia	State PA	Zip Code 19106	Category/ Type
Purpose of Disbursement Contribution			
Candidate Name		Memo Item <input type="checkbox"/>	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

1500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of 66B**

Mailing Address 3529 Vinton Road

City Philadelphia State PA Zip Code 19154

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5498**

Amount of Each Disbursement this Period

[ ] 250.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Bill Monahan**

Mailing Address P.O. Box 31

City Orangeville State PA Zip Code 17859

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5476**

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Friends of Dave Dellosa**

Mailing Address 2136 Highland Avenue

City Morton State PA Zip Code 19070

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 16 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5486**

Amount of Each Disbursement this Period

[ ] 10000.00

Memo Item

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

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

[ ] 10750.00

[ ]



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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Jennifer O'Mara**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		29		2020

Mailing Address 630 Yale Avenue  
#4

City Morton State PA Zip Code 19070

Purpose of Disbursement Contribution

FEC Identification Number

C

**Transaction ID : SB29.5497**

Amount of Each Disbursement this Period

500.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**B. Friends of Joe Torsella**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2020

Mailing Address P.O. Box 626

City Flourtown State PA Zip Code 19031

Purpose of Disbursement Contribution

FEC Identification Number

C

**Transaction ID : SB29.5471**

Amount of Each Disbursement this Period

1000.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

Full Name (Last, First, Middle Initial)

**C. Friends of Joe Webster**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
08		05		2020

Mailing Address P.O. Box 26264

City Collegeville State PA Zip Code 19426

Purpose of Disbursement Contribution

FEC Identification Number

C

**Transaction ID : SB29.5478**

Amount of Each Disbursement this Period

500.00

Candidate Name

Category/Type

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

Memo Item

State: District:

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

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

2000.00

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

### A. Friends of Kevin Branco

Mailing Address 6003 Valley Forge Drive

City: Coopersburg State: PA Zip Code: 18036

Purpose of Disbursement: Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB29.5481

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

### B. Friends of Martina White

Mailing Address P.O. Box 16041

City: Philadelphia State: PA Zip Code: 19114

Purpose of Disbursement: Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
08 / 26 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB29.5483

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

### C. Friends of Napoleon Nelson

Mailing Address P.O. Box 53

City: Wyncote State: PA Zip Code: 19095

Purpose of Disbursement: Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C [ ]

Transaction ID : SB29.5493

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

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

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

[ ] 1500.00

[ ]

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

**A. Friends of Todd Stephens**

Mailing Address 94 N Bacton Hill Road

City Malvern State PA Zip Code 19355

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C

Transaction ID : SB29.5492

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Friends of Wendy Ullman**

Mailing Address P.O. Box 16

City Fountainville State PA Zip Code 18923

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C

Transaction ID : SB29.5491

Amount of Each Disbursement this Period

500.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. Kane for Senate**

Mailing Address 209 Harding Avenue

City Havertown State PA Zip Code 19083

Purpose of Disbursement  
Contribution

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Category/  
Type

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C

Transaction ID : SB29.5487

Amount of Each Disbursement this Period

1000.00

Memo Item

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

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

2000.00

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 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)

**Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local 830 PAC**

Full Name (Last, First, Middle Initial)

**A. Montgomery County Democratic Committee**

Mailing Address 21 E. Airy Street

City Norristown State PA Zip Code 19401

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 05 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5473**

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

Full Name (Last, First, Middle Initial)

**B. Nancy 4 PA House**

Mailing Address P.O. Box 523

City Hatboro State PA Zip Code 19040

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
09 / 29 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5489**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

Full Name (Last, First, Middle Initial)

**C. The Committee to Elect Joseph DiGirolamo Mayor**

Mailing Address 8 Neshaminy Interplex Suite 215

City Trevese State PA Zip Code 19053

Purpose of Disbursement Contribution

Candidate Name

Office Sought:  House  Senate  President

State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Date of Disbursement

MM / DD / YYYY  
08 / 20 / 2020

FEC Identification Number

C [ ]

**Transaction ID : SB29.5480**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

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

[ ] 2500.00

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

[ ] 20250.00