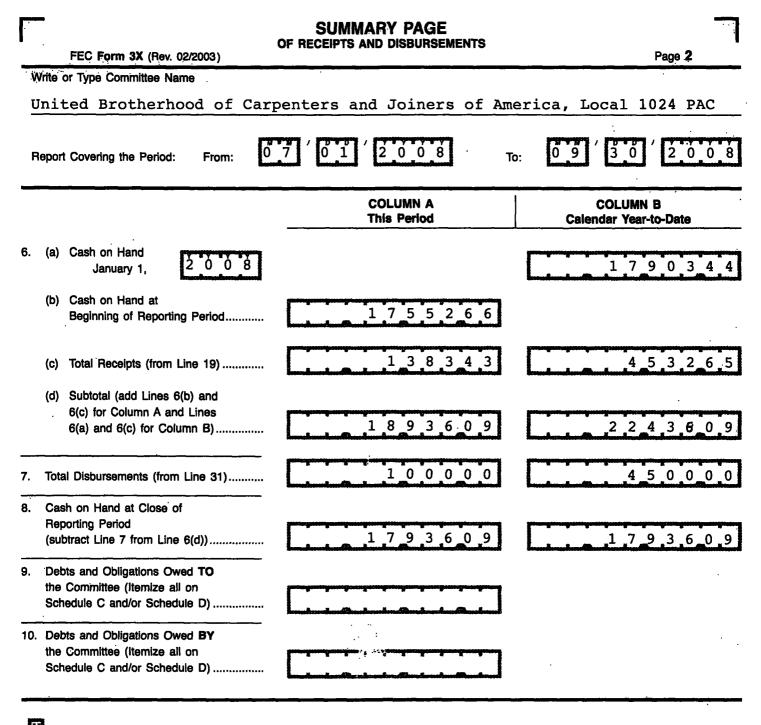
· ·				, <i>e</i>		•					
FEC	AND	DRT OF DISBUR	SEMEN	ITS	ł	L CENTER					
FORM 3X For Other Than An Authorized Committee				2008 OCT 17 AM 9: 07 Office Use Only							
1. NAME OF COMMITTEE (in fr	TYPE OR	PRINT V	Example: I over the lir	f typing, type les.	12FE4M						
United Brotherhood of Carpenters and Joiners of America											
Local Union	1024, PAC			1 1 1 1 1			1				
ADDRESS (number and	street)	N. Centre	St.		L_l_ll						
Check if differ											
than previousl reported. (AC	y iCumb	erland			MD	2, 1,5, 0,2	-				
2. FEC IDENTIFICA	TION NUMBER	r cn	ΥA	·	STATE 🛦	ZIP CO					
C 0 0 3 6	1923		s This Report N	NEW (N) <b>OR</b>		MENDED					
4. TYPE OF REP( (Choose One) (a) Quarterly Repo	Re Du	port unit	20 (M2) 20 (M3)	May 20 (Ms Jun 20 (M6	Second and	g 20 (M8)	Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election				
	<i>л</i> .s.	Apr	20 (M4)	Jul 20 (M7)		20 (M10)	Year Only) Jan 31 (YE)				
April 15 Quarterly	Report (Q1) (c)	12-Day	Priman	(12P)	General	(12G)	Runoff (12R)				
July 15 Quarterly	Report (Q2)	<b>PRE</b> -Election Report for the:	Seend generg	ntion (12C)	Special	ind ind					
X October 1 Quarterly	Report (Q3)					(120) 	<u>.</u>				
January 3 Year-End	Report (YE)	Electio	on on			in the State					
July 31 N Report (N Year Only	on-election	30-Day <b>POST</b> -Election Report for the:	Genera	l (30G)	Runoff	(30R)	Special (30S)				
Termination (TER)	on Report	Electio	on on	<b>, (</b> , , , , , , , , , , , , , , , , , ,		in the State					
5. Covering Period	87'8	<u>1</u> ´ <u>2`0`0</u>	8 thro	ugh Ö	9 3 0	2008	]				
I certify that I have exa	amined this Report				true, correct a	nd complete.					
Type or Print Name of	Treasurer	E. Will	Liam DuVa	11, II							
Signature of Treasurer	E. Wir	- alwall.			Date 1	<u>ָּס</u> וֹ מוֹ אַ	2008				
NOTE: Submission of fa	lse, erroneous, or ir	complete informatio	n may subject th	e person signing	this Report to	the penalties of 2	U.S.C. §437g.				
Office Use						FEC FOI Rev. 12/					

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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

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DETAILED SUMMARY PAGE of Receipts							
w	rite or Type Committee Name		Page 3				
	nited Brotherhood of Carpe	nters and Joiners of Ame	rica, Local 1024 PAC				
R	eport Covering the Period: From:	7 ′ 0 1 ′ 2 0 0 8 To	»: <b>₽</b> <sup>₩</sup> 9 <sup>₩</sup> ′ <sup>3</sup> <sup>8</sup> ′ <sup>2</sup> <sup>0</sup> ′ <sup>0</sup> 8				
	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date				
11.	Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) (ii) Unitemized (iii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶	1 3 8 3 4 3 1 3 8 3 4 3	4 5 3 2 6 5 4 5 3 2 6 5				
	<ul> <li>(b) Political Party Committees</li></ul>	1 3 8 3 4 3	4 5 3 2 6 5				
12.	Totals to Line 33, page 5)						
13.	All Loans Received						
	Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)						
16.	Refunds of Contributions Made to Federal Candidates and Other Political Committees	······································	· · · · · · · · · · · · · · · · · · ·				
17.	Other Federal Receipts (Dividends, Interest, etc.)						
18.	Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3)						
	(b) Levin Funds (from Schedule H5)						
	(c) Total Transfers (add 18(a) and 18(b))						
19.	Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))►	138343	4 5 3 2 6 5				
20.	Total Federal Receipts (subtract Line 18(c) from Line 19) ►						

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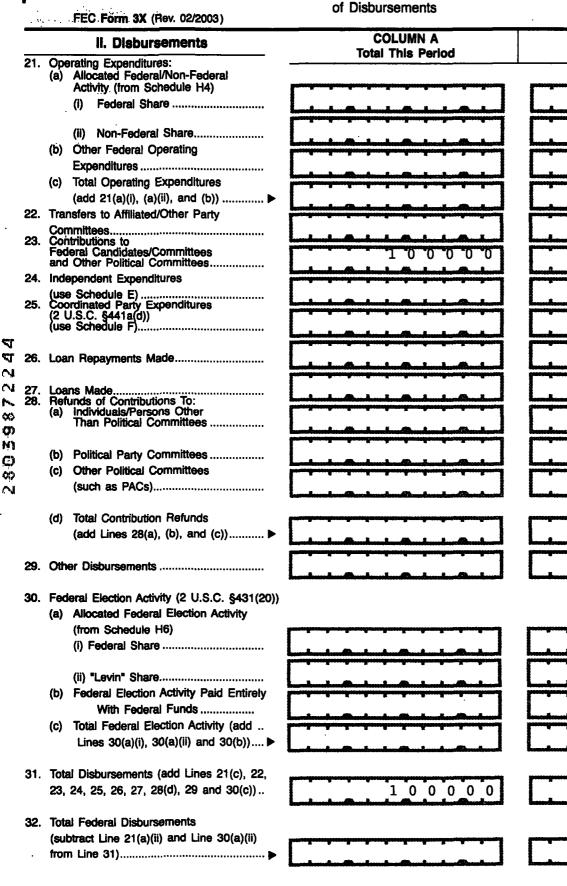
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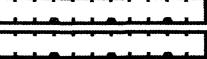
## DETAILED SUMMARY PAGE



COLUMN B

**Calendar Year-to-Date** 







### **DETAILED SUMMARY PAGE**

of Disbursements

Page 5

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

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FEC Form 3X (Rev. 02/2003)

SC	CHEDULE B (FEC Form 3X)			NUMBER: PAGE 1 OF 1								
	EMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the		k only	y one)							
••		Detailed Summary Page		21b	22 28a	X	23 28b	24		25		
[A-	information and from such Departs and Output	onto may not he estate a second		27		<u> </u>				29 Dtribu	30b	
or	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.								tee.			
$\overline{\nabla}$	NAME OF COMMITTEE (In Full)				· · · · ·				<u> </u>	2		
$ \rangle$	United Brotherhood of Carp	enters and Join	ers	of A	Amerio	ca	, Lo	ocal	10	24	PAC	
<u> </u>	Full Name (Last, First, Middle Initial)											
A.	A. Friends of Jeff Metz					Dis <b>1</b> 7	burse	ment	- TY	T Y		
	Mailing Address 17223 Beechers Ave.				09	]	1		0	0	8	
ł	Chy s Frostburg M	itate Zip Code D 21532									····	
	Purpose of Disbursement Campaign Donation	ſ		-	Amount	t of	Each	Disburse	ment	this	Period	
	Candidate Name		Catego	rv/			<b>····</b>		5	0	0 0	
	Jeff Metz Office Sought:   House   Disburserr		Туре		<b></b>		<b></b>		. ) 			
		ient For: Primary General										
	President X	Other (specify)										
	State: MD District: Allega	ny Co. Board of	Ed.									
-	Full Name (Last, First, Middle Initial)	-										
B.	Jeanne Owens, Treasurer	<u> </u>			Date of Disbursement							
	Malling Address 201 Washington St.				0 9	]	<u> </u>	<u> </u>	2	0 (		
		State Zip Code MD 21502										
	Purpose of Disbursement	<u>21502</u>										
	Fundraiser					t of	Each	Disburse	ment	this	Period	
	Candidate Name Category/					*	<b>.</b>	F	0	0	0 0	
	Kevin Kelly Type				<b></b>		<b>A</b>					
		Primary General										
	President	Other (specify)										
	State: MD District: 1-R	-	-									
C.	Full Name (Last, First, Middle Initial)				Date of		shuree	ment				
Υ.	Committee to Elect Brian Grim					. Da				<b>.</b>	TY 1	
	Mailing Address PO_BOX_974											
		tate Zip Code MD 21502										
	Purpose of Disbursement Campaign Donation	ſ		7	Amoun	t of	Each	Disburse	men	t this	Period	
	Candidate Name Brian Grim Type								-		0 0	
	Office Sought: House Disbursen	nent For:			i							
		Primary General										
		Other (specify)										
<b>F</b>	State: ID District: Cumbe	rland City Coun	cil_									
s	UBTOTAL of Disbursements This Page (optional)			• •			<b>A</b>					
1	OTAL This Period (last page this line number only)			• •				1 0	0	0	00	
less.		· ·										

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# Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how it was received.

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USPS First Class Mail	Postmarked
USPS Registered/Certified	Postmarked (R/C)
USPS Priority Mail	Postmarked
Delivery Confirmation <sup>™</sup> or Signature Co	onfirmation <sup>™</sup> Label
USPS Express Mail	Postmarked
Postmark Illegible	
No Postmark	
Overnight Delivery Service (Specify):	Shipping Date
Next Bus	iness Day Delivery
Received from House Records & Registration Office	Date of Receipt
Received from Senate Public Records Office	Date of Receipt
Received from Electronic Filing Office	Date of Receipt
Date Other (Specify):	of Receipt or Postmarked
Imp	10/17/01
PREPARER	DATE PREPARED
(3/2005)	