

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		709779.35
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	666235.85									
(c) Total Receipts (from Line 19)	0.00	145954.81								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	666235.85	855734.16								
7. Total Disbursements (from Line 31)	56064.84	245563.15								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	610171.01	610171.01								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	0

D	D
1	3

Y	Y	Y	Y
2	0	1	0

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	0.00	145954.81
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	145954.81
(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)	0.00	145954.81
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	0.00
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))	0.00	145954.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	145954.81

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	5789.84	77555.65
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	5789.84	77555.65
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.....	50275.00	168007.50
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))..	56064.84	245563.15
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	56064.84	245563.15

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	0.00	145954.81
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	145954.81
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	5789.84	77555.65
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	5789.84	77555.65

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

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Transaction ID: SB21B.8454

Date of Disbursement

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

Mailing Address 75 ROCKY POINT YAPHANK RD

Amount of Each Disbursement this Period

4900.00

City State Zip Code
ROCKY POINT NY 11778

Purpose of Disbursement
PAC COMMITTEE COORDINATOR SALARY

001

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Transaction ID: SB21B.8455

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	0

Mailing Address 75 ROCKY POINT YAPHANK RD

Amount of Each Disbursement this Period

819.15

City State Zip Code
ROCKY POINT NY 11778

Purpose of Disbursement
TRAVEL EXPENSE REIMBURSEMENT

002

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Transaction ID: SB21B.8455.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	3		2	0	1	0

Mailing Address 75 ROCKY POINT YAPHANK RD

Amount of Each Disbursement this Period

636.00

City State Zip Code
ROCKY POINT NY 11778

Purpose of Disbursement
MILEAGE REIMBURSEMENT(1,272 MI X .050)

002

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)

5719.15

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) AT & T MOBILITY</p> <p>Mailing Address PO BOX 537118</p> <p>City ATLANTA State GA Zip Code 30353</p> <p>Purpose of Disbursement TELEPHONE EXPENSE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8455.1</p> <p>Date of Disbursement: 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period: 64.88</p> <p>[MEMO ITEM]</p>
<p>B. Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address PO BOX 100</p> <p>City ALBANY State NY Zip Code 12250</p> <p>Purpose of Disbursement TELEPHONE EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8455.2</p> <p>Date of Disbursement: 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period: 85.27</p> <p>[MEMO ITEM]</p>
<p>C. Full Name (Last, First, Middle Initial) MTA BRIDGE AND TUNNEL</p> <p>Mailing Address 347 MADISON AVENUE</p> <p>City NEW YORK State NY Zip Code 10004</p> <p>Purpose of Disbursement BRIDGE AND TUNNEL TOLLS</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8455.3</p> <p>Date of Disbursement: 10 / 13 / 2010</p> <p>Amount of Each Disbursement this Period: 33.00</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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

5719.15

**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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ANDREW CUOMO 2010	Transaction ID: SB29.8427 Date of Disbursement 10 / 13 / 2010	
	Mailing Address PO BOX 683		
	City NEW YORK State NY Zip Code 10008	Amount of Each Disbursement this Period	10000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) BISHOP FOR CONGRESS	Transaction ID: SB29.8428 Date of Disbursement 10 / 12 / 2010	
	Mailing Address PO BOX 437		
	City FARMINGVILLE State NY Zip Code 11738	Amount of Each Disbursement this Period	3000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
	Candidate Name		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: NY District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) CITIZENS FOR HANNON	Transaction ID: SB29.8429 Date of Disbursement 10 / 12 / 2010	
	Mailing Address PO BOX 398		
	City GARDEN CITY State NY Zip Code 11530	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

13500.00

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"/> 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
DEMOCRATIC ASSEMBLY CAMPAIGN

Mailing Address 100 SOUTH SWAN ST

City ALBANY State NY Zip Code 12210

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8430
Date of Disbursement

10 / 05 / 2010

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)
DEMOCRATIC ORG OF QUEENS

Mailing Address 72-50 AUSTIN ST

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8431
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

600.00

C.

Full Name (Last, First, Middle Initial)
DINAPOLI 2010

Mailing Address 928 BROADWAY

City NEW YORK State NY Zip Code 10010

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8432
Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

3600.00

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"/> 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) DINAPOLI 2010 Mailing Address 928 BROADWAY City NEW YORK State NY Zip Code 10010 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8433 Date of Disbursement 10 / 08 / 2010 Amount of Each Disbursement this Period 10000.00 011 Category/ Type
B.	Full Name (Last, First, Middle Initial) FOLEY FOR SENATE Mailing Address PO BOX 214 City FARMINGVILLE State NY Zip Code 11728 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8434 Date of Disbursement 10 / 13 / 2010 Amount of Each Disbursement this Period 400.00 011 Category/ Type
C.	Full Name (Last, First, Middle Initial) FRIENDS OF ANDREW RAI A Mailing Address PO BOX 1483 City EAST ISLIP State NY Zip Code 11731 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8436 Date of Disbursement 10 / 07 / 2010 Amount of Each Disbursement this Period 400.00 011 Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶

10800.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 11 / 15

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) FRIENDS OF CAREN LOGUERCIO <hr/> Mailing Address PO BOX 521 <hr/> City MT SINAI State NY Zip Code 11766 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8459 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 5 / 2 0 1 0	Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) FRIENDS OF CATHERINE NOLAN <hr/> Mailing Address PO BOX 648698 <hr/> City OAKLAND State NY Zip Code 11364 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8439 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 6 / 2 0 1 0	Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) FRIENDS OF CATHERINE NOLAN <hr/> Mailing Address PO BOX 648698 <hr/> City OAKLAND State NY Zip Code 11364 <hr/> Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8440 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 0 8 / 2 0 1 0	Amount of Each Disbursement this Period 175.00

SUBTOTAL of Disbursements This Page (optional) ▶

725.00

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"/> 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) SAVINO FOR NEW YORK	Transaction ID: SB29.8446 Date of Disbursement 10 / 06 / 2010	
	Mailing Address 481 EIGHTH AVENUE SUITE 1202		
	City NEW YORK State NY Zip Code 10001	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) SCHNEIDERMAN FOR ATTORNEY GENERAL	Transaction ID: SB29.8447 Date of Disbursement 10 / 13 / 2010	
	Mailing Address 131 VARICK ST		
	City NEW YORK State NY Zip Code 10013	Amount of Each Disbursement this Period	10000.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) STEVENSON 2010	Transaction ID: SB29.8448 Date of Disbursement 10 / 06 / 2010	
	Mailing Address PO BOX 61		
	City NEW YORK State NY Zip Code 10008	Amount of Each Disbursement this Period	300.00
	Purpose of Disbursement POLITICAL CONTRIBUTION	011	Category/Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

10800.00

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"/> 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

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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) SUFFOLK COUNTY CONSERVATIVE CHAIRMANS COMM</p> <p>Mailing Address PO BOX 100</p> <p>City BAYPORT State NY Zip Code 11705</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>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.8449</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="300.00"/></p> <p>011 Category/ Type</p>
<p>B. Full Name (Last, First, Middle Initial) SUFFOLK COUNTY DEMOCRATIC COMMITTEE</p> <p>Mailing Address 467 ROUTE 112</p> <p>City PATCHOGUE State NY Zip Code 11772</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>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.8450</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="1"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="600.00"/></p> <p>011 Category/ Type</p>
<p>C. Full Name (Last, First, Middle Initial) SUFFOLK COUNTY REPUBLICAN COMMITTEE</p> <p>Mailing Address 3340 VETERANS MEMORIAL HIGHWAY</p> <p>City BOHEMIA State NY Zip Code 11716</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>Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.8451</p> <p>Date of Disbursement</p> <p><input type="text" value="1"/> <input type="text" value="0"/> / <input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="0"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p> <p>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)

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<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THE HUNTINGTON TOWN DEMOCRATIC COMMITTEE

Mailing Address 44 ELM STREET

City
HUNTINGTON

State Zip Code
NY 11743

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8452

Date of Disbursement

10 / 06 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

50075.00