

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

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

ADDRESS (number and street) **50-02 5th Street, 2nd Fl**  
Check if different than previously reported. (ACC) **Long Island City** **NY** **11101**

2. FEC IDENTIFICATION NUMBER ▼ CITY ▲ STATE ▲ ZIP CODE ▲  
**C** **C00327478** 3. IS THIS REPORT  NEW (N) OR  AMENDED (A)

4. TYPE OF REPORT (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report (Q1)  
 July 15 Quarterly Report (Q2)  
 October 15 Quarterly Report (Q3)  
 January 31 Year-End 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 (12S)  
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   /   /       through   /   /

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 **O'CONNOR, PAUL, , ,**

Signature of Treasurer **O'CONNOR, PAUL, , ,** [Electronically Filed] Date   /   /

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

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

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

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2019"/>		452617.41
(b) Cash on Hand at Beginning of Reporting Period.....	498472.84	
(c) Total Receipts (from Line 19) .....	102634.74	181797.17
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	601107.58	634414.58
7. Total Disbursements (from Line 31).....	62251.75	95558.75
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	538855.83	538855.83
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

**For further information contact:**  
  
Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
  
Toll Free 800-424-9530  
Local 202-694-1100

DETAILED SUMMARY PAGE  
of Receipts

Write or Type Committee Name

PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 04 / 01 / 2019 To: 06 / 30 / 2019

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).....	25.00	25.00
(ii) Unitemized .....	102546.28	181263.87
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	102571.28	181288.87
(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) .....	102571.28	181288.87
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	63.46	508.30
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)).....▶	102634.74	181797.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	102634.74	181797.17

**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 .....	280.75	769.75
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	280.75	769.75
22. Transfers to Affiliated/Other Party Committees.....	20509.00	36252.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	41462.00	58537.00
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)) ..	62251.75	95558.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62251.75	95558.75

**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) .....	102571.28	181288.87
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	102571.28	181288.87
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	280.75	769.75
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	280.75	769.75

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

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

FOR LINE NUMBER: PAGE 6 OF 16  
(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

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

**A.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name  
**CONA, MICHAEL, , ,**

Mailing Address **17 EAST FIGUREA AVENUE**

City <b>STATEN ISLAND</b>	State <b>NY</b>	Zip Code <b>10308</b>
------------------------------	--------------------	--------------------------

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

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ **25.00**

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	09	/	2019

**Transaction ID : SA11A1.8740**

Amount of Each Receipt this Period  

25.00
-------

Memo Item Contribution

**B.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Receipt this Period  

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Memo Item

**C.** Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

Mailing Address

City	State	Zip Code
------	-------	----------

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

Name of Employer (for Individual) \_\_\_\_\_ Occupation (for Individual) \_\_\_\_\_

Receipt For:  
 Primary  General  
 Other (specify)

Aggregate Year-to-Date ▼

Date of Receipt  

M M M	/	D D D	/	Y Y Y Y Y Y
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Amount of Each Receipt this Period  

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Memo Item

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<b>25.00</b>
<b>TOTAL</b> This Period (last page this line number only).....	<b>25.00</b>

**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 OF 16
<input 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 checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>A. M &amp; T Bank</b>		Date of Receipt
Mailing Address 10-30 Jackson Avenue		<input type="text" value="04"/> / <input type="text" value="30"/> / <input type="text" value="2019"/>
City LIC	State NY	Zip Code 11101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.8722</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="20.92"/>
Aggregate Year-to-Date ▼ <input type="text" value="465.76"/>		<input type="checkbox"/> Memo Item Interest Income

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>B. M &amp; T Bank</b>		Date of Receipt
Mailing Address 10-30 Jackson Avenue		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2019"/>
City LIC	State NY	Zip Code 11101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.8723</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Amount of Each Receipt this Period <input type="text" value="21.61"/>
Aggregate Year-to-Date ▼ <input type="text" value="487.37"/>		<input type="checkbox"/> Memo Item Interest Income

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name <b>C. M &amp; T Bank</b>		Date of Receipt
Mailing Address 10-30 Jackson Avenue		<input type="text" value="06"/> / <input type="text" value="28"/> / <input type="text" value="2019"/>
City LIC	State NY	Zip Code 11101
FEC ID number of contributing federal political committee. <input type="text" value="C"/>		<b>Transaction ID : SA17.8725</b>
Name of Employer (for Individual)		Occupation (for Individual)
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)		Amount of Each Receipt this Period <input type="text" value="20.93"/>
Aggregate Year-to-Date ▼ <input type="text" value="508.30"/>		<input type="checkbox"/> Memo Item Interest Income

<b>SUBTOTAL</b> of Receipts This Page (optional).....	<input type="text" value="63.46"/>
<b>TOTAL</b> This Period (last page this line number only).....	<input type="text" value="63.46"/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. Novak/Francella. LLC**

Mailing Address One Presidential Blvd  
Ste 330

City Bala Cynwyd State PA Zip Code 19004

Purpose of Disbursement  
Accounting Fee

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

**Transaction ID : SB21B.8741**  
Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

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

Date of Disbursement

/  /

FEC Identification Number

Amount of Each Disbursement this Period

Memo Item

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

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



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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)  
**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

**A. UA POLITICAL EDUCATION COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 02/2019

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 11 / 2019

FEC Identification Number: C00012476

Transaction ID : SB22.8729

Amount of Each Disbursement this Period: 4849.00

Memo Item

**B. UA POLITICAL EDUCATION COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 03/2019

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 04 / 25 / 2019

FEC Identification Number: C00012476

Transaction ID : SB22.8730

Amount of Each Disbursement this Period: 5105.00

Memo Item

**C. UA POLITICAL EDUCATION COMMITTEE**

Full Name (Last, First, Middle Initial)

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement Per Capita - 04/2019

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 30 / 2019

FEC Identification Number: C00012476

Transaction ID : SB22.8731

Amount of Each Disbursement this Period: 4590.00

Memo Item

**SUBTOTAL** of Disbursements This Page (optional)..... ▶ 14544.00

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. UA POLITICAL EDUCATION COMMITTEE**

Mailing Address 3 Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement  
Per Capita - 05/2019

008  
Category/  
Type

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y  
06 / 27 / 2019

FEC Identification Number

C C00012476

**Transaction ID : SB22.8732**

Amount of Each Disbursement this Period

5965.00

Memo Item

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

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Date of Disbursement

M M /  D D /  Y Y Y Y Y Y

FEC Identification Number

C

Amount of Each Disbursement this Period

Memo Item

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

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

5965.00

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

20509.00







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

Full Name (Last, First, Middle Initial) <b>A. McMahon For District Attorney</b>		Date of Disbursement MM / DD / YYYY 06 / 06 / 2019	
Mailing Address 70 Spring Hill Avenue			
City Staten Island	State NY	Zip Code 10301	
Purpose of Disbursement Contribution - 3 Guest Tickets		<input type="text" value="011"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : <b>SB29.8759</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="750.00"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>B. NEW YORK STATE PIPE TRADES</b>		Date of Disbursement MM / DD / YYYY 04 / 18 / 2019	
Mailing Address 30 Bluebird Road			
City South Glen Falls	State NY	Zip Code 12803	
Purpose of Disbursement Per Capita - 4th Qtr 2018		<input type="text" value="011"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : <b>SB29.8793</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="25062.00"/>
State: District:			<input type="checkbox"/> Memo Item

Full Name (Last, First, Middle Initial) <b>C. NYLCV</b>		Date of Disbursement MM / DD / YYYY 05 / 02 / 2019	
Mailing Address 30 Broad Street, FL30			
City NY	State NY	Zip Code 10004	
Purpose of Disbursement (1) Full Page Ad		<input type="text" value="011"/>	FEC Identification Number <input type="text" value="C"/>
Candidate Name		Category/ Type	Transaction ID : <b>SB29.8746</b>
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) ▼		Amount of Each Disbursement this Period <input type="text" value="750.00"/>
State: District:			<input type="checkbox"/> Memo Item

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

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

<input type="text" value="26562.00"/>
<input type="text" value=""/>

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

Full Name (Last, First, Middle Initial)

**A. RIDGEWOOD DEMOCRATIC CLUB**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		04		2019

Mailing Address PO Box 640698

FEC Identification Number

**C** [ ]

**Transaction ID : SB29.8743**

Amount of Each Disbursement this Period

[ ] 500.00

Memo Item

City Oakland Gardens State NY Zip Code 11364

Purpose of Disbursement Gold Page Ads

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. Savino 2020**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		27		2019

Mailing Address c/o 39 Broadway, Suite 1740

FEC Identification Number

**C** [ ]

**Transaction ID : SB29.8784**

Amount of Each Disbursement this Period

[ ] 2500.00

Memo Item

City New York State NY Zip Code 10006

Purpose of Disbursement Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. Stacey Pheffer Amato for Assembly**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		30		2019

Mailing Address PO Box 184

FEC Identification Number

**C** [ ]

**Transaction ID : SB29.8767**

Amount of Each Disbursement this Period

[ ] 1000.00

Memo Item

City Rockaway Beach State NY Zip Code 11693

Purpose of Disbursement Contribution

**011**  
Category/  
Type

Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  Other (specify) ▼

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

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

[ ] 4000.00

[ ]

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

**A. The New York Conference of Italian-American State Legislator**

Full Name (Last, First, Middle Initial)

Mailing Address PO Box 7189

City Albany State NY Zip Code 12224-0189

Purpose of Disbursement (1) Gold Full Page Ad

Candidate Name

Office Sought:  House  Senate  President

Disbursement For:  Primary  General  Other (specify) ▼

State: District:

Date of Disbursement: 05 / 30 / 2019

FEC Identification Number: C

Transaction ID : SB29.8778

Amount of Each Disbursement this Period: 500.00

Memo Item

**B.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

**C.**

Full Name (Last, First, Middle Initial)

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:

FEC Identification Number: C

Amount of Each Disbursement this Period:

Memo Item

<b>SUBTOTAL</b> of Disbursements This Page (optional).....▶	500.00
<b>TOTAL</b> This Period (last page this line number only).....▶	41462.00