

**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

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

2 IRON ORE ROAD AT RT 33

☐Check if different
than previously
reported. (ACC)

ENGLISHTOWN

NJ

07726

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00155440

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

01

01

2010

through

03

31

2010

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

MICHAEL MALONEY

Signature of Treasurer

Electronically Filed by MICHAEL MALONEY

Date

04

10

2010

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

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

2 / 39

Write or Type Committee Name

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M M
0 1D D
0 1Y Y Y Y
2 0 1 0

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 Y Y Y Y 2010		129740.07
(b) Cash on Hand at Beginning of Reporting Period	129740.07	
(c) Total Receipts (from Line 19)	105948.77	105948.77
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	235688.84	235688.84
7. Total Disbursements (from Line 31)	110082.52	110082.52
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	125606.32	125606.32
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

FEC Form 3X (Rev. 06/2004)

3 / 39

Write or Type Committee Name

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	1	0

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	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)	5029.52	5029.52
(ii) Unitemized	100318.93	100318.93
(iii) TOTAL (add Lines 11(a)(i) and (ii)	105348.45	105348.45
(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)	105348.45	105348.45
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.)	600.32	600.32
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))	105948.77	105948.77
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	105948.77	105948.77

DETAILED SUMMARY PAGE

of Disbursements

4 / 39

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.....	9322.92	9322.92	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	9322.92	9322.92	
22. Transfers to Affiliated/Other Party Committees.....	2237.00	2237.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	2500.00	
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	297.60	297.60	
(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))	297.60	297.60	
29. Other Disbursements.....	95725.00	95725.00	
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))..	110082.52	110082.52	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	110082.52	110082.52	

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

5 / 39

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)	105348.45	105348.45
34. Total Contribution Refunds (from Line 28(d))	297.60	297.60
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	105050.85	105050.85
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	9322.92	9322.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	9322.92	9322.92

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

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

FOR LINE NUMBER: PAGE 6 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MARK A ALSTON

Mailing Address 123 GRAVEL HILL-SPOTSWOOD ROAD

City

MONROE TOWNSHIP

State

NJ

Zip Code

08831

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

229.35

Date of Receipt

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

Transaction ID: SA11AI.60310

Amount of Each Receipt this Period

229.35

B.

Full Name (Last, First, Middle Initial)

BARRY J BANDOLA

Mailing Address 51 RED VALLEY ROAD

City

CLARKSBURG

State

NJ

Zip Code

08510

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

232.20

Date of Receipt

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

Transaction ID: SA11AI.60336

Amount of Each Receipt this Period

232.20

C.

Full Name (Last, First, Middle Initial)

JEFFREY S BOGUS

Mailing Address 8 SHEARN DRIVE

City

MIDDLESEX

State

NJ

Zip Code

08846

FEC ID number of contributing
federal political committee.

C

Name of Employer

PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

255.83

Date of Receipt

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

Transaction ID: SA11AI.60383

Amount of Each Receipt this Period

255.83

SUBTOTAL of Receipts This Page (optional)

717.38

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 7 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MICHAEL T BRADLEY

Mailing Address 24 THOMPSON BRIDGE ROAD

City

JACKSON

State

NJ

Zip Code

08527

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

239.25

Date of Receipt

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

Transaction ID: SA11AI.60405

Amount of Each Receipt this Period

239.25

B.

Full Name (Last, First, Middle Initial)

JOHN V BREECE

Mailing Address 201 SILVERBAY ROAD

City

TOMS RIVER

State

NJ

Zip Code

08753

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

213.45

Date of Receipt

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

Transaction ID: SA11AI.60409

Amount of Each Receipt this Period

213.45

C.

Full Name (Last, First, Middle Initial)

WALTER L CHURCH III

Mailing Address PO BOX 1057

City

ISLAND HEIGHTS

State

NJ

Zip Code

08732

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

202.80

Date of Receipt

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

Transaction ID: SA11AI.60492

Amount of Each Receipt this Period

202.80

SUBTOTAL of Receipts This Page (optional)

655.50

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 8 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

THOMAS E DYE JR

Mailing Address 70 HOLLY TREE LANE

City

TOMS RIVER

State

NJ

Zip Code

08753

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

228.90

Date of Receipt

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

Transaction ID: SA11AI.60620

Amount of Each Receipt this Period

228.90

B.

Full Name (Last, First, Middle Initial)

KEVIN R GIVEN

Mailing Address 37 WINTERSET DRIVE

City

TRENTON

State

NJ

Zip Code

08690

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

214.80

Date of Receipt

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

Transaction ID: SA11AI.60714

Amount of Each Receipt this Period

214.80

C.

Full Name (Last, First, Middle Initial)

ROY W HANSEN

Mailing Address 210 GRANT AVENUE

City

PISCATAWAY

State

NJ

Zip Code

08854

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.45

Date of Receipt

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

Transaction ID: SA11AI.60773

Amount of Each Receipt this Period

252.45

SUBTOTAL of Receipts This Page (optional)

696.15

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:
(check only one)

PAGE 9 / 39

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MICHAEL J HERBST

Mailing Address 119 OAK STREET

City

BRIDGEWATER

State

NJ

Zip Code

08807

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

219.30

Date of Receipt

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

Transaction ID: SA11AI.60795

Amount of Each Receipt this Period

219.30

B.

Full Name (Last, First, Middle Initial)

ROBERT J HERBST

Mailing Address 25 Channing Road

City

EAST BRUNSWICK

State

NJ

Zip Code

08816

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

201.30

Date of Receipt

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

Transaction ID: SA11AI.60796

Amount of Each Receipt this Period

201.30

C.

Full Name (Last, First, Middle Initial)

THOMAS M JACOBS

Mailing Address 5 GARFIELD COURT

City

DAYTON

State

NJ

Zip Code

08810

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

209.40

Date of Receipt

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

Transaction ID: SA11AI.60843

Amount of Each Receipt this Period

209.40

SUBTOTAL of Receipts This Page (optional)

630.00

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 10 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DENNIS J MCBRIDE

Mailing Address 49 GOEKE DRIVE

City

HAMILTON

State

NJ

Zip Code

08610

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

230.40

Date of Receipt

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

Transaction ID: SA11AI.61063

Amount of Each Receipt this Period

230.40

B.

Full Name (Last, First, Middle Initial)

KARLA MCCOY

Mailing Address 1516 MARNE HIGHWAY

City

HAINESPORT

State

NJ

Zip Code

08036

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

223.20

Date of Receipt

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

Transaction ID: SA11AI.61069

Amount of Each Receipt this Period

223.20

C.

Full Name (Last, First, Middle Initial)

SALVATORE MINARDI

Mailing Address 14 PINEVIEW AVENUE

City

KEANSBURG

State

NJ

Zip Code

07734

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

204.61

Date of Receipt

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

Transaction ID: SA11AI.61108

Amount of Each Receipt this Period

204.61

SUBTOTAL of Receipts This Page (optional)

658.21

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 11 / 39

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MATTHEW A QUAGLIARIELLO

Mailing Address 2 LAKERIDGE DRIVE

City

MATAWAN

State

NJ

Zip Code

07747

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

224.85

Date of Receipt

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

Transaction ID: SA11AI.61268

Amount of Each Receipt this Period

224.85

B.

Full Name (Last, First, Middle Initial)

JOHN A SALERNO

Mailing Address 111 SOUTH MAIN STREET

City

FARMINGDALE

State

NJ

Zip Code

07727

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.20

Date of Receipt

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

Transaction ID: SA11AI.61329

Amount of Each Receipt this Period

211.20

C.

Full Name (Last, First, Middle Initial)

ROGER V SALERNO

Mailing Address 211 BROAD STREET

City

MANASQUAN

State

NJ

Zip Code

08736

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

211.20

Date of Receipt

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

Transaction ID: SA11AI.61330

Amount of Each Receipt this Period

211.20

SUBTOTAL of Receipts This Page (optional)

647.25

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 / 39

(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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ALLEN L SLATE JR

Mailing Address 72 TRAPPE LANE

City

LANGHORNE

State

PA

Zip Code

19047

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

352.95

Date of Receipt

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

Transaction ID: SA11AI.61397

Amount of Each Receipt this Period

352.95

B.

Full Name (Last, First, Middle Initial)

WILLIAM J SMITH

Mailing Address 114 CLEVELAND AVENUE

City

MILLTOWN

State

NJ

Zip Code

08850

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

252.60

Date of Receipt

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

Transaction ID: SA11AI.61408

Amount of Each Receipt this Period

252.60

C.

Full Name (Last, First, Middle Initial)

JEFFREY SWAL

Mailing Address 57 RICHARDSON ROAD

City

ROBBINSVILLE

State

NJ

Zip Code

08691

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

218.48

Date of Receipt

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

Transaction ID: SA11AI.61442

Amount of Each Receipt this Period

218.48

SUBTOTAL of Receipts This Page (optional)

824.03

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 / 39

(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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

LEO J WARD

Mailing Address 114 LEANNE DRIVE

City

NEW EGYPT

State

NJ

Zip Code

08533

FEC ID number of contributing
federal political committee.

C

Name of Employer
PLUMBERS & PIPEFITTERS LO-
CAL 9

Occupation

PLUMBER/PIPEFITTER

Receipt For:

☐
☐
☐

Primary

General

Other (specify) ▼

Aggregate Year-to-Date ▼

201.00

Date of Receipt

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

Transaction ID: SA11AI.61526

Amount of Each Receipt this Period

201.00

SUBTOTAL of Receipts This Page (optional)

201.00

TOTAL This Period (last page this line number only)

5029.52

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

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

FOR LINE NUMBER: PAGE 14 / 39

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☒ 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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 100 Fidelity Plaza

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

594.90

Date of Receipt

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

Transaction ID: SA17.61605

Amount of Each Receipt this Period

594.90

Interest

B.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 100 Fidelity Plaza

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

599.40

Date of Receipt

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

Transaction ID: SA17.61606

Amount of Each Receipt this Period

4.50

Interest

C.

Full Name (Last, First, Middle Initial)

Wachovia Bank

Mailing Address 100 Fidelity Plaza

City

North Brunswick

State

NJ

Zip Code

08902

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

600.32

Date of Receipt

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

Transaction ID: SA17.61607

Amount of Each Receipt this Period

0.92

Interest

SUBTOTAL of Receipts This Page (optional)

600.32

TOTAL This Period (last page this line number only)

600.32

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 15 / 39

<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

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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Building & Construction Trades Dept. AFL-CIO

Mailing Address 815 16th street, NW
Suite 600

City Washington State DC Zip Code 20006

Purpose of Disbursement
Conference registration

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.60200

Date of Disbursement

01 / 19 / 2010

Amount of Each Disbursement this Period

750.00

B.

Full Name (Last, First, Middle Initial)

David A. Gerson, CPA & Associates, P.C.

Mailing Address 201 W Passaic Street
Suite 405

City Rochelle Park State NJ Zip Code 07662

Purpose of Disbursement
Accounting Services

Candidate Name

001
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.60199

Date of Disbursement

01 / 05 / 2010

Amount of Each Disbursement this Period

1825.00

C.

Full Name (Last, First, Middle Initial)

Mary Bridget Enterprises

Mailing Address 18 Stirling Way

City Lumberton State NJ Zip Code 08048

Purpose of Disbursement
T-Shirts & Sweatshirts - no specific candidate identified

Candidate Name

004
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.60287

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

5637.22

SUBTOTAL of Disbursements This Page (optional)

8212.22

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 16 / 39

<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

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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NJ State AFL-CIO COPE

Mailing Address 106 West State Street

City
Trenton

State
NJ

Zip Code
08608

Purpose of Disbursement

Per Capita Fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.60201

Date of Disbursement

01 / 19 / 2010

Amount of Each Disbursement this Period

612.50

B.

Full Name (Last, First, Middle Initial)

NJ State AFL-CIO COPE

Mailing Address 106 West State Street

City
Trenton

State
NJ

Zip Code
08608

Purpose of Disbursement

Per capita fees

Candidate Name

001

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB21B.60202

Date of Disbursement

01 / 21 / 2010

Amount of Each Disbursement this Period

498.20

SUBTOTAL of Disbursements This Page (optional)

1110.70

TOTAL This Period (last page this line number only)

9322.92

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 17 / 39

<input type="checkbox"/> 21b	<input checked="" 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

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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Mailing Address 901 Massachusetts Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Transfers

Candidate Name

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB22.60203

Date of Disbursement

02 / 08 / 2010

Amount of Each Disbursement this Period

1193.00

B.

Full Name (Last, First, Middle Initial)

UNITED ASSOCIATION POLITICAL EDUCATION COMMITTEE

Mailing Address 901 Massachusetts Avenue NW

City Washington State DC Zip Code 20001

Purpose of Disbursement
Transfer

Candidate Name

008
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB22.60260

Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

1044.00

SUBTOTAL of Disbursements This Page (optional)

2237.00

TOTAL This Period (last page this line number only)

2237.00

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)

PAGE 18 / 39

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" 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

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 & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

COMMITTEE TO RE-ELECT CONGRESSMAN CHRIS SMITH

Mailing Address PO BOX 3184
PO BOX 498

City HAMILTON State NJ Zip Code 08619

Purpose of Disbursement
Tickets

Candidate Name

007
Category/
Type

Office Sought: ☒ House
☐ Senate
☐ President

State: NJ District: 04

Disbursement For: 2010
☒ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB23.60258

Date of Disbursement

03 / 05 / 2010

Amount of Each Disbursement this Period

2500.00

SUBTOTAL of Disbursements This Page (optional)

2500.00

TOTAL This Period (last page this line number only)

2500.00

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)

PAGE 19 / 39

<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 checked="" 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Rafael E Morales

Mailing Address 734 HERBERTSVILLE ROAD

City
BRICK

State
NJ

Zip Code
08724

Purpose of Disbursement

Refund of Contribution

Candidate Name

010

Category/
Type

Office Sought:

☐ House

☐ Senate

☐ President

State:

District:

Disbursement For:

☐ Primary

☐ General

☐ Other (specify) ▼

Transaction ID: SB28A.60198

Date of Disbursement

01 / 20 / 2010

Amount of Each Disbursement this Period

297.60

SUBTOTAL of Disbursements This Page (optional)

297.60

TOTAL This Period (last page this line number only)

297.60

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 20 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

2010 Brian Unger for Mayor

Mailing Address 1032 Woodgate Avenue

City Long Branch State NJ Zip Code 07740

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60261

Date of Disbursement

03 / 09 / 2010

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Amodeo for Assembly-Atlantic County Republicans

Mailing Address PO Box 484

City Linwood State NJ Zip Code 08221

Purpose of Disbursement
Contribution

Candidate Name

012

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60228

Date of Disbursement

02 / 05 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Barnes for Assembly Election Fund

Mailing Address 72 Buchanan Road

City Eidson State NJ Zip Code 08820

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60251

Date of Disbursement

02 / 22 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 21 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Bonnie Watson Coleman for Assembly

Mailing Address 132 Sanhican Drive

City State Zip Code
Trenton NJ 08618

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60234

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
Carteret Democratic Organization

Mailing Address PO Box 57

City State Zip Code
Carteret NJ 07008

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60223

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

C. Full Name (Last, First, Middle Initial)
Committee for Evans for Assembly

Mailing Address 45 Essex Street
Suite 108

City State Zip Code
Hackensack NJ 07601

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60232

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 22 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Committee to Elect Annette Quijano	Transaction ID: SB29.60207 Date of Disbursement																				
Mailing Address PO Box 2150	<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>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	5		2	0	1	0												
City Union State NJ Zip Code 07083	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Committee to Elect Cryan & Quijano	Transaction ID: SB29.60269 Date of Disbursement																				
Mailing Address PO Box 2150	<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>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
City Union State NJ Zip Code 07083	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets Candidate Name	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Committee to Elect Joe Cryan	Transaction ID: SB29.60270 Date of Disbursement																				
Mailing Address 722 Greenwood Road	<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>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
City South Union State NJ Zip Code 07083	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5000.00

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 23 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Committee to Elect Patrick J. Diegnan to Assembly	Transaction ID: SB29.60275 Date of Disbursement
Mailing Address PO Box 736	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 1 0</div> </div>
City South Plainfield State NJ Zip Code 07080 Purpose of Disbursement Tickets Candidate Name	Amount of Each Disbursement this Period <div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>007</div> <div>Category/Type</div> </div>
B. Full Name (Last, First, Middle Initial) Committee to Elect Sheila Oliver	Transaction ID: SB29.60235 Date of Disbursement
Mailing Address 45 Essex Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 5 / 2 0 1 0</div> </div>
City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Tickets Candidate Name	Amount of Each Disbursement this Period <div>3000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>007</div> <div>Category/Type</div> </div>
C. Full Name (Last, First, Middle Initial) Committee to Re- Elect Vincent Prieto Assemblyman	Transaction ID: SB29.60219 Date of Disbursement
Mailing Address 155 Polifly Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 5 / 2 0 1 0</div> </div>
City Hackensack State NJ Zip Code 07601 Purpose of Disbursement Tickets Candidate Name	Amount of Each Disbursement this Period <div>1500.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<div> <div>007</div> <div>Category/Type</div> </div>

SUBTOTAL of Disbursements This Page (optional)

6000.00

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 24 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Committee to Re-Elect Vincent Prieto for Assembly	Transaction ID: SB29.60291 Date of Disbursement																				
Mailing Address 155 Polifly Road	<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>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
<table border="1"> <tr> <td>City Hackensack</td> <td>State NJ</td> <td>Zip Code 07601</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Tickets</td> <td rowspan="2">007 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Hackensack	State NJ	Zip Code 07601	Purpose of Disbursement Tickets		007 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00											
City Hackensack	State NJ	Zip Code 07601																			
Purpose of Disbursement Tickets		007 Category/ Type																			
Candidate Name																					
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Conaway For Assembly	Transaction ID: SB29.60240 Date of Disbursement																				
Mailing Address 770 North Drive	<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>2</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	0		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		1	0		2	0	1	0												
<table border="1"> <tr> <td>City Brick</td> <td>State NJ</td> <td>Zip Code 08724</td> </tr> <tr> <td colspan="2">Purpose of Disbursement</td> <td rowspan="2">Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Brick	State NJ	Zip Code 08724	Purpose of Disbursement		Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>2000.00</td> </tr> </table>	2000.00											
City Brick	State NJ	Zip Code 08724																			
Purpose of Disbursement		Category/ Type																			
Candidate Name																					
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Dalina for Freeholder	Transaction ID: SB29.60294 Date of Disbursement																				
Mailing Address PO Box 434	<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>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
<table border="1"> <tr> <td>City Edison</td> <td>State NJ</td> <td>Zip Code 08817</td> </tr> <tr> <td colspan="2">Purpose of Disbursement Tickets</td> <td rowspan="2">007 Category/ Type</td> </tr> <tr> <td colspan="2">Candidate Name</td> </tr> </table>	City Edison	State NJ	Zip Code 08817	Purpose of Disbursement Tickets		007 Category/ Type	Candidate Name		Amount of Each Disbursement this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00											
City Edison	State NJ	Zip Code 08817																			
Purpose of Disbursement Tickets		007 Category/ Type																			
Candidate Name																					
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4500.00

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 25 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Democratic Assembly Campaign Committee	Transaction ID: SB29.60209 Date of Disbursement																				
Mailing Address PO Box 3712	<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>1</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		0	5		2	0	1	0												
City Trenton State NJ Zip Code 08629	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Edison Democratic Organization	Transaction ID: SB29.60215 Date of Disbursement																				
Mailing Address 87 Gate House Lane	<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>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	1	0												
City Edison State NJ Zip Code 08820	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Election Fund of Anthony P. Carabelli	Transaction ID: SB29.60272 Date of Disbursement																				
Mailing Address c/o Pat Bartram 4 Verona 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>0</td><td>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
City Trenton State NJ Zip Code 08619	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 26 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Election Fund of Craig J Coughlin for Assembly	Transaction ID: SB29.60273 Date of Disbursement																				
Mailing Address PO Box 368	<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>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Woodbridge</td> <td>NJ</td> <td>07095</td> </tr> <tr> <td colspan="2">Purpose of Disbursement</td> <td rowspan="2"> <div>007</div> Category/ Type </td> </tr> <tr> <td colspan="2">Tickets</td> </tr> <tr> <td colspan="3">Candidate Name</td> </tr> </table>	City	State	Zip Code	Woodbridge	NJ	07095	Purpose of Disbursement		<div>007</div> Category/ Type	Tickets		Candidate Name			Amount of Each Disbursement this Period <div>1500.00</div>						
City	State	Zip Code																			
Woodbridge	NJ	07095																			
Purpose of Disbursement		<div>007</div> Category/ Type																			
Tickets																					
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Election Fund of Donald Norcross for Senate	Transaction ID: SB29.60266 Date of Disbursement																				
Mailing Address PO Box 1003	<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>3</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	5		2	0	1	0												
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Camden</td> <td>NJ</td> <td>08101</td> </tr> <tr> <td colspan="2">Purpose of Disbursement</td> <td rowspan="2"> <div>007</div> Category/ Type </td> </tr> <tr> <td colspan="2">Tickets</td> </tr> <tr> <td colspan="3">Candidate Name</td> </tr> </table>	City	State	Zip Code	Camden	NJ	08101	Purpose of Disbursement		<div>007</div> Category/ Type	Tickets		Candidate Name			Amount of Each Disbursement this Period <div>2000.00</div>						
City	State	Zip Code																			
Camden	NJ	08101																			
Purpose of Disbursement		<div>007</div> Category/ Type																			
Tickets																					
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Election Fund of John S Wisniewski	Transaction ID: SB29.60227 Date of Disbursement																				
Mailing Address 17 Main 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>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	1	0												
<table border="1"> <tr> <td>City</td> <td>State</td> <td>Zip Code</td> </tr> <tr> <td>Sayreville</td> <td>NJ</td> <td>08872</td> </tr> <tr> <td colspan="2">Purpose of Disbursement</td> <td rowspan="2"> <div>012</div> Category/ Type </td> </tr> <tr> <td colspan="2">Contribution</td> </tr> <tr> <td colspan="3">Candidate Name</td> </tr> </table>	City	State	Zip Code	Sayreville	NJ	08872	Purpose of Disbursement		<div>012</div> Category/ Type	Contribution		Candidate Name			Amount of Each Disbursement this Period <div>1500.00</div>						
City	State	Zip Code																			
Sayreville	NJ	08872																			
Purpose of Disbursement		<div>012</div> Category/ Type																			
Contribution																					
Candidate Name																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5000.00

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 27 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Election Fund of Marge Caldwell-Wilson for Council

Mailing Address 19 Woodlane Road

City Lawrenceville State NJ Zip Code 08648

Purpose of Disbursement
Contribution

Candidate Name

012
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60217

Date of Disbursement

02 / 05 / 2010

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Election Fund of Marge Caldwell-Wilson for Council

Mailing Address 19 Woodlane Road

City Lawrenceville State NJ Zip Code 08648

Purpose of Disbursement
Tickets

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60280

Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Election Fund of Marge Caldwell-Wilson for Council

Mailing Address 19 Woodlane Road

City Lawrenceville State NJ Zip Code 08648

Purpose of Disbursement
Tickets

Candidate Name

007
Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60281

Date of Disbursement

03 / 16 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 28 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Election Fund of Paula Sollami Covello	Transaction ID: SB29.60253 Date of Disbursement																				
Mailing Address 1 Dix Lane	<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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	1	0												
City Lawrenceville State NJ Zip Code 08648	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution Candidate Name	<table border="1"> <tr> <td colspan="10">1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Election Fund of Senator Bob Singer	Transaction ID: SB29.60225 Date of Disbursement																				
Mailing Address 703 Richmond Avenue, Suite 2	<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>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	1	0												
City Pt Pleasant Beach State NJ Zip Code 08742	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets Candidate Name	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Election Fund of Senator Sean Kean	Transaction ID: SB29.60237 Date of Disbursement																				
Mailing Address 1120 Wildwood 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>0</td><td>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	1	0												
City Manasquan State NJ Zip Code 08736	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets Candidate Name	<table border="1"> <tr> <td colspan="10">1800.00</td> </tr> </table>	1800.00																			
1800.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4300.00

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 29 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Fred Scalera Campaign Committee

Mailing Address 45 Essex St. Suite 108

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60229

Date of Disbursement

02 / 05 / 2010

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

Friends of Dan Benson Freeholder

Mailing Address PO Box 8003

City Trenton State NJ Zip Code 08650

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60290

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

Friends of John Curley for Freeholder

Mailing Address 2507 Beech Street

City Point Pleasant State NJ Zip Code 08742

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60276

Date of Disbursement

03 / 05 / 2010

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 30 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Friends of Kafton, Giblin & Krakower	Transaction ID: SB29.60264 Date of Disbursement
Mailing Address 2200 W. County Line Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 1 0</div> </div>
City Jackson State NJ Zip Code 08527	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1000.00</div>
Candidate Name	<div>007</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Kevin Meara	Transaction ID: SB29.60246 Date of Disbursement
Mailing Address PO Box 8431	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 1 0</div> </div>
City Hamilton State NJ Zip Code 08650	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>1500.00</div>
Candidate Name	<div>012</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends of Paul Belardo for School Board	Transaction ID: SB29.60284 Date of Disbursement
Mailing Address 195 Briner Lane	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 9 / 2 0 1 0</div> </div>
City Hamilton State NJ Zip Code 08690	Amount of Each Disbursement this Period
Purpose of Disbursement Contribution	<div>2000.00</div>
Candidate Name	<div>012</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

4500.00

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 31 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Friends of Rob Clifton for Freeholder

Mailing Address 2507 Beech Street

City
Point Pleasant

State
NJ

Zip Code
08742

Purpose of Disbursement
Contribution

Candidate Name

012

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60268

Date of Disbursement

03 / 05 / 2010

Amount of Each Disbursement this Period

1400.00

B.

Full Name (Last, First, Middle Initial)

Friends of Terry Duffy

Mailing Address 188 Lincoln Avenue

City
West Milford

State
NJ

Zip Code
07480

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60248

Date of Disbursement

02 / 17 / 2010

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

Hamilton Republican Committee

Mailing Address PO Box 9228

City
Hamilton

State
NJ

Zip Code
08650

Purpose of Disbursement
Contribution

Candidate Name

012

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60211

Date of Disbursement

01 / 19 / 2010

Amount of Each Disbursement this Period

2000.00

SUBTOTAL of Disbursements This Page (optional)

4400.00

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 32 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Hamilton Republican Committee

Mailing Address PO Box 9228

City Hamilton State NJ Zip Code 08650

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60239

Date of Disbursement

02 / 09 / 2010

Amount of Each Disbursement this Period

2000.00

B.

Full Name (Last, First, Middle Initial)
Jack Connors for Assembly

Mailing Address 45 Essex St., Suite 108

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60230

Date of Disbursement

02 / 05 / 2010

Amount of Each Disbursement this Period

1500.00

C.

Full Name (Last, First, Middle Initial)
Jack Connors for Assembly

Mailing Address 8008 Route 130 North

City Delran State NJ Zip Code 08075

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60292

Date of Disbursement

03 / 29 / 2010

Amount of Each Disbursement this Period

1500.00

SUBTOTAL of Disbursements This Page (optional)

5000.00

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 33 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) MAC Council of NJ PAC	Transaction ID: SB29.60205 Date of Disbursement
Mailing Address 1301 S. Columbus Blvd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 5 / 2 0 1 0</div> </div>
City Philadelphia State PA Zip Code 19147 Purpose of Disbursement Contribution Candidate Name <div> <div>012</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>7200.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B. Full Name (Last, First, Middle Initial) Madden For Senate	Transaction ID: SB29.60279 Date of Disbursement
Mailing Address 300 N. Marion Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 1 0</div> </div>
City Winonah State NJ Zip Code 08090 Purpose of Disbursement Tickets Candidate Name <div> <div>007</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>2000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C. Full Name (Last, First, Middle Initial) Manuel Segura for Mayor	Transaction ID: SB29.60288 Date of Disbursement
Mailing Address 425 Greenwood Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 9 / 2 0 1 0</div> </div>
City Trenton State NJ Zip Code 08609 Purpose of Disbursement Tickets Candidate Name <div> <div>007</div> <div>Category/Type</div> </div>	Amount of Each Disbursement this Period <div>2000.00</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

11200.00

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 34 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) MCDC (Morris County Democratic Committee)	Transaction ID: SB29.60263 Date of Disbursement
Mailing Address PO Box 306	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 1 0</div> </div>
City Morristown State NJ Zip Code 07963	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>500.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Mercer County Central Labor Council (MCCLC)	Transaction ID: SB29.60247 Date of Disbursement
Mailing Address 1 Lower Ferry Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 1 0</div> </div>
City West Trenton State NJ Zip Code 08628	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1200.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Middlesex County AFL-CIO Labor Council	Transaction ID: SB29.60254 Date of Disbursement
Mailing Address 15 Debonis Drive	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 7 / 2 0 1 0</div> </div>
City Milltown State NJ Zip Code 08850	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1500.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3200.00

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 35 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Neptune Democratic Executive Committee	Transaction ID: SB29.60255 Date of Disbursement																				
Mailing Address c/o Gene J. Anthony, Esq 48 South 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>2</td><td></td><td>2</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		2	2		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		2	2		2	0	1	0												
City Neptune State NJ Zip Code 07724	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets	<table border="1"> <tr> <td colspan="10">700.00</td> </tr> </table>	700.00																			
700.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) New Jersey State Pipe Trades PAC Fund	Transaction ID: SB29.60214 Date of Disbursement																				
Mailing Address 534 South Route 73	<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>2</td><td></td><td>0</td><td>8</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	8		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	8		2	0	1	0												
City Winslow State NJ Zip Code 08095	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">2386.00</td> </tr> </table>	2386.00																			
2386.00																					
Candidate Name	<table border="1"> <tr> <td>012</td> </tr> </table> Category/ Type	012																			
012																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) New Jersey State Pipe Trades PAC Fund	Transaction ID: SB29.60278 Date of Disbursement																				
Mailing Address 534 South Route 73	<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>3</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	9		2	0	1	0												
City Winslow State NJ Zip Code 08095	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">2089.00</td> </tr> </table>	2089.00																			
2089.00																					
Candidate Name	<table border="1"> <tr> <td>012</td> </tr> </table> Category/ Type	012																			
012																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

5175.00

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 36 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NJ Democratic State Committee

Mailing Address 196 West State Street

City
Trenton

State
NJ

Zip Code
08608

Purpose of Disbursement
Contribution

Candidate Name

012

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.60213

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2010

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

Ocean County Democratic Finance Comm.

Mailing Address 249 Hawaii Drive

City
Brick

State
NJ

Zip Code
08723

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.60210

Date of Disbursement

M M / D D / Y Y Y Y
01 / 19 / 2010

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Oroho for Senate

Mailing Address 93 Spring Street

City
Newton

State
NJ

Zip Code
07860

Purpose of Disbursement
Tickets

Candidate Name

007

Category/
Type

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.60244

Date of Disbursement

M M / D D / Y Y Y Y
02 / 10 / 2010

Amount of Each Disbursement this Period

1400.00

SUBTOTAL of Disbursements This Page (optional)

8900.00

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 37 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Rafano for Freeholder	Transaction ID: SB29.60295 Date of Disbursement																				
Mailing Address PO Box 434	<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>3</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	9		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	9		2	0	1	0												
City Edison State NJ Zip Code 08817	Amount of Each Disbursement this Period																				
Purpose of Disbursement Tickets	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>007</td> </tr> </table> Category/ Type	007																			
007																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
B. Full Name (Last, First, Middle Initial) Rothman for New Jersey	Transaction ID: SB29.60282 Date of Disbursement																				
Mailing Address PO Box 714	<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>3</td><td></td><td>1</td><td>6</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	6		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	6		2	0	1	0												
City Hackensack State NJ Zip Code 07602	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">1000.00</td> </tr> </table>	1000.00																			
1000.00																					
Candidate Name	<table border="1"> <tr> <td>012</td> </tr> </table> Category/ Type	012																			
012																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
C. Full Name (Last, First, Middle Initial) Ryan, Witte and Tzibrouk for Mayor and Council	Transaction ID: SB29.60220 Date of Disbursement																				
Mailing Address 1706 E 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>2</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	2		0	5		2	0	1	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	2		0	5		2	0	1	0												
City Lake Como State NJ Zip Code 07719	Amount of Each Disbursement this Period																				
Purpose of Disbursement Contribution	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Candidate Name	<table border="1"> <tr> <td>012</td> </tr> </table> Category/ Type	012																			
012																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

SUBTOTAL of Disbursements This Page (optional)

4000.00

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 38 / 39

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Sam Thompson For Assembly	Transaction ID: SB29.60216 Date of Disbursement
Mailing Address 5 Lincroft Avenue	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 5 / 2 0 1 0</div> </div>
City Old Bridge State NJ Zip Code 08857	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1500.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Upendra J Chivukula for Assembly	Transaction ID: SB29.60231 Date of Disbursement
Mailing Address 45 Essex Street Suite 108	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 5 / 2 0 1 0</div> </div>
City Hackensack State NJ Zip Code 07601	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1050.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Upendra J Chivukula for Assembly	Transaction ID: SB29.60293 Date of Disbursement
Mailing Address 45 Essex Street Suite 108	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 1 0</div> </div>
City Hackensack State NJ Zip Code 07601	Amount of Each Disbursement this Period
Purpose of Disbursement Tickets	<div>1000.00</div>
Candidate Name	<div>007</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

3550.00

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 PageFOR LINE NUMBER:
(check only one)

PAGE 39 / 39

<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)

PLUMBERS & PIPEFITTERS LOCAL NO 9 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

Valenti for Freeholder

Mailing Address PO Box 434

City
EdisonState
NJZip Code
08817Purpose of Disbursement
Tickets

Candidate Name

007
Category/
TypeOffice Sought: ☐ House
☐ Senate
☐ President

State:

District:

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

Transaction ID: SB29.60297

Date of Disbursement

M M / D D / Y Y Y Y
0 3 / 2 9 / 2 0 1 0

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

95725.00