REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Summary Page

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full): SHEET METAL WORKERS INTERNATIONAL ASSOCIATION LOCAL 28 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported: 500 GREENWICH STREET

CITY, STATE and ZIP CODE: New York NY 10013

2. FEC IDENTIFICATION NUMBER: C 001 69490

3. ☐ This committee qualified as a multicandidate committee DURING THIS Reporting Period on _____ (date).

4. TYPE OF REPORT

(a) ☐ April 15 Quarterly Report

☐ July 15 Quarterly Report

☒ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20 ☐ June 20 ☐ October 20
☐ March 20 ☐ July 20 ☐ November 20
☐ April 20 ☐ August 20 ☐ December 20
☐ May 20 ☐ September 20 ☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____

(b) Is this Report an Amendment? ☐ YES ☒ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period July 1, 1993 through Sep 30, 1993		
6. (a) Cash on Hand January 1, 1993		$ 119544
(b) Cash on Hand at Beginning of Reporting Period	$ 126108	
(c) Total Receipts (from Line 19)	$ 23818	$ 67190
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 149926	$ 186734
7. Total Disbursements (from Line 30)	$ 19218	$ 56026
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 130708	$ 130708
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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: DANIEL WILTON

Signature of Treasurer: x [signature]

Date: 10/13/93

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

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FEC FORM 3X

(revised 1/1/91)

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2. FEC FORM 3X

revised 1/1/91

NAME OF COMMITTEE: Smwia Local 22 Political Action Committee

REPORT COVERING PERIOD FROM: Jan 1, 1993 TO: Sep 30, 1993

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year
11. Contributions (other than loans) From:		
a. Individual/Persons Other Than Political Committees		
i. Itemized (use Schedule A)		
ii. Unitemized	23818	67190
iii. Total (add i and ii) ➤	23818	67190
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contributions (add a iii, b and c) ➤	23818	67190
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	23818	67190
20. Total Federal Receipts (subtract line 18 from line 19) ➤	23818	67190
II. Disbursements		
21. Operating Expenditures:		
a. Shared Federal/Non-Federal Activity (from Schedule H4)		
i. Federal Share		
ii. Non-Federal Share		
b. Other Federal Operating Expenditures	2823	16482
c. Total Operating Expenditures (add a i, a ii, and b) ➤	2823	16482
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
a. Individuals/Persons Other Than Political Committees		
b. Political Party Committees		
c. Other Political Committees (such as PACs)		
d. Total Contribution Refunds (add a, b and c) ➤		
29. Other Disbursements	16395	39544
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	19218	56026
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	19218	56026
III. Net Contributions Operating Expenditures		
32. Total Contributions (other than loans) (from line 11d)	23818	67190
33. Total Contribution Refunds (from line 28d)		
34. Net Contributions (other than loans) (subtract line 33 from 32)	23818	67190
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	2823	16482
36. Offsets to Operating Expenditures (from line 15)		
37. Net Operating Expenditures (subtract line 36 from 35) ➤	2823	16482

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SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 21b

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 a political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

Sylvia Lopez 23 Political Action Committee

A. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
28 Realty Inc 500 Greenwich Street New York NY 10013	July Rent Disbursement for: Primary General X Other (specify) office	7/7/93	330
B. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
American Express PO Box 2553 New York NY 10013	Meeting Expense Disbursement for: Primary General X Other (specify) office	7/14/93	193
C. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
28 Realty Inc 500 Greenwich Street New York NY 10013	Aug Rent Disbursement for: Primary General X Other (specify) office	8/16/93	330
D. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Kops Gowers Tuttle + Lenhow 200 Old Country Road Mineola NY 11501	Accounting Services Disbursement for: Primary General X Other (specify) professional	8/16/93	625
E. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
28 Realty Inc 500 Greenwich Street New York NY 10013	Sep Rent Disbursement for: Primary General X Other (specify) office	9/3/93	345
F. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Sylvia Lopez 500 Greenwich Street New York, NY 10013	Office Expense Disbursement for: Primary General X Other (specify) office	9/3/93	220
G. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Cheryl Tuttle 500 Greenwich Street New York NY 10013	Office Expense Disbursement for: Primary General X Other (specify) office	9/3/93	189
H. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Dan Wilton 500 Greenwich Street New York NY 10013	Meeting Expense Disbursement for: Primary General X Other (specify) office	9/3/93	50
I. Full Name, Mailing Address and ZIP Code	**Purpose of Disbursement**	**Date (month, day, year)**	**Amount of Each Disbursement This Period**
Chase Manhattan Bank 345 Hudson Street New York NY 10014	Bank Charges Disbursement for: Primary General X Other (specify) office	7/1/93	168

SUBTOTAL of Disbursements This Page (optional) 2450

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

SCHEDULE B

ITEMIZED DISBURSEMENTS

Use separate schedules for each category of the Detailed Summary Page

PAGE 2 OF 2

FOR LINE NUMBER 21a

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)

SMWIA Local 23 Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Morton Press Inc 45 E 30 Street New York NY 10016	Printing Disbursement for: ___ Primary ___ General X Other (specify) Office	9/3/93	373
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ___ Primary ___ General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	373
TOTAL This Period (last page this line number only)	2823

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 1 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full): SMWIA LOCAL 28 POLITICAL ACTION COMMITTEE

Full Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. SENATOR MARTY MARKOWITZ COMMITTEE 2065 E 23 STREET NEW YORK, NY 11229	NY SENATE Disbursement for: Primary / General X Other (specify): CONTRIBUTION	7/22/93	195
B. FRIENDS OF BOB GAFNEY PO BOX 5418 HAUPPAUGE NY 11788	NY ASSEMBLY Disbursement for: Primary / General X Other (specify): CONTRIBUTION	8/4/93	500
C. HEVESI 93 67-08 INGRAM STREET FOREST HILLS NY 11375	NYC COMPTROLLER Disbursement for: Primary / General X Other (specify): CONTRIBUTION	8/24/93	6500
D. JOHN F. "JACK" PHILLIPS 8 BAHAMA AVENUE TOMS RIVER, NJ 08253	NJ ASSEMBLY Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/3/93	500
E. COCHRANE FOR TREASURER 108 REVERE DRIVE SAYVILLE, NY 11782	SUFFOLK COUNTY TREASURER Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/10/93	450
F. THE CITIZENS TO ELECT GRIFFITHS AND PASQUINUCCI 2 BAUMER ROAD SAYREVILLE NJ 08872	SAYREVILLE NJ COUNCIL Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/10/93	500
G. ELECTION FUND OF JIM KRONE 12 GASTON AVENUE GARFIELD NJ 07026	NJ SENATE Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/13/93	1500
H. HEVESI 93 67-08 INGRAM STREET FOREST HILLS, NY 11375	NYC COMPTROLLER Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/20/93	3250
I. DEMOCRATIC COMMITTEE OF BERGEN COUNTY 14 SOUTH STATE STREET HACKENSACK, NJ 07601	NEW JERSEY VARIOUS CANDIDATES Disbursement for: Primary / General X Other (specify): CONTRIBUTION	9/21/93	1000

SUBTOTAL of Disbursements This Page (optional)	14395
TOTAL This Period (last page this line number only)	

SCHEDULE B

ITEMIZED DISBURSEMENTS

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

PAGE 2 OF 2

FOR LINE NUMBER 29

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NAME OF COMMITTEE (in Full)

SENIA LOCAL 28 POLITICAL ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code PEOPLE FOR PAUL TONNA PO BOX 1728 HUNTINGTON STATION NY 11746	SUFFOLK COUNTY LEGISLATURE Disbursement for: Primary General X Other (specify) CONTRIBUTION	9/10/93	1000
B. Full Name, Mailing Address and ZIP Code COMMITTEE TO ELECT TIMOTHY CALLAHAN PO BOX 26 CARLE PLACE NY 11514-0026	NASSAU COUNTY DISTRICT ATTORNEY Disbursement for: Primary General Other (specify)	9/16/93	1000
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: Primary General Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	2000
TOTAL This Period (last page this line number only)	16395

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page ____ of ____ for
LINE NUMBER ____
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
SMWIA LOCAL 28 POLITICAL ACTION COMMITTEE				
A. Full Name, Mailing Address and Zip Code of Debtor or Creditor SMWIA LOCAL 28 ESCROW ACCOUNT 520 GREENWICH STREET NEW YORK NY 10013	0	23818	23818	0
Nature of Debt (Purpose): CONTRIBUTIONS FROM UNION MEMBERS NOT TRANSFERRED FROM ESCROW ACCOUNT AT END OF REPORTING PERIOD	[redacted]			
B. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):	[redacted]			
C. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):	[redacted]			
D. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):	[redacted]			
E. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):	[redacted]			
F. Full Name, Mailing Address and Zip Code of Debtor or Creditor				
Nature of Debt (Purpose):	[redacted]			

1) SUBTOTALS This Period This Page (optional)	
2) TOTAL This Period (last page this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 10/15/93
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

ES. — PREPARER

10/19/93 — DATE PREPARED

FEC FORM 70-2 (12/92)

9 3 0 3 8 6 3 5 3 1 2