

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 05/2016)

Write or Type Committee Name

Operating Engineers Local 98 POL Action Committee - Social Action Fund

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2021"/>		67948.77
(b) Cash on Hand at Beginning of Reporting Period.....	58961.17	
(c) Total Receipts (from Line 19)	9669.55	15695.95
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	68630.72	83644.72
7. Total Disbursements (from Line 31).....	5000.00	20014.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	63630.72	63630.72
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE
of Receipts

Write or Type Committee Name

Operating Engineers Local 98 POL Action Committee - Social Action Fund

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

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).....	9659.02	15665.99
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	9659.02	15665.99
(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)	9659.02	15665.99
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.).....	10.53	29.96
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	9669.55	15695.95
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	9669.55	15695.95

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	0.00	14.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	14.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	15000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (52 U.S.C. § 30116(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements (Including Non-Federal Donations).....	0.00	0.00
30. Federal Election Activity (52 U.S.C. § 30101(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	5000.00	20014.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	5000.00	20014.00

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 5

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)	9659.02	15665.99
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9659.02	15665.99
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	14.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	14.00

**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 6 OF 10
<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)
Operating Engineers Local 98 POL Action Committee - Social Action Fund

A. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
6855.54

Date of Receipt
MM / DD / YYYY
07 / 01 / 2021

Transaction ID : SA11AI.4371

Amount of Each Receipt this Period
848.57

Memo Item
MEMBERS CONTRIBUTIONS

B. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
7408.74

Date of Receipt
MM / DD / YYYY
08 / 02 / 2021

Transaction ID : SA11AI.4373

Amount of Each Receipt this Period
553.20

Memo Item
MEMBERS CONTRIBUTIONS

C. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
8442.54

Date of Receipt
MM / DD / YYYY
08 / 03 / 2021

Transaction ID : SA11AI.4374

Amount of Each Receipt this Period
1033.80

Memo Item
MEMBERS CONTRIBUTION

SUBTOTAL of Receipts This Page (optional).....	2435.57
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 7 OF 10
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
Operating Engineers Local 98 POL Action Committee - Social Action Fund

A. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
9377.62

Date of Receipt
09 / 07 / 2021
Transaction ID : SA11AI.4375

Amount of Each Receipt this Period
935.08

Memo Item
MEMBERS CONTRIBUTIONS

B. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
10064.83

Date of Receipt
09 / 07 / 2021
Transaction ID : SA11AI.4376

Amount of Each Receipt this Period
687.21

Memo Item
MEMBERS CONTRIBUTIONS

C. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
10785.66

Date of Receipt
10 / 01 / 2021
Transaction ID : SA11AI.4377

Amount of Each Receipt this Period
720.83

Memo Item
MEMBERS CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....	2343.12
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 8 OF 10
<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

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NAME OF COMMITTEE (In Full)
Operating Engineers Local 98 POL Action Committee - Social Action Fund

A. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
11595.59

Date of Receipt
10 / 04 / 2021
Transaction ID : SA11AI.4378

Amount of Each Receipt this Period
809.93

Memo Item
MEMBERS CONTRIBUTIONS

B. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
12365.24

Date of Receipt
10 / 25 / 2021
Transaction ID : SA11AI.4379

Amount of Each Receipt this Period
769.65

Memo Item
MEMBERS CONTRIBUTIONS

C. IUOE LOCAL 98 HEALTH AND WELFARE FUND

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

Mailing Address 40 HUDSON DRIVE
PO BOX 1290

City SOUTHWICK State MA Zip Code 01077

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

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

Receipt For:
 Primary General
 Other (specify)

Aggregate Year-to-Date ▼
13215.95

Date of Receipt
11 / 02 / 2021
Transaction ID : SA11AI.4380

Amount of Each Receipt this Period
850.71

Memo Item
MEMBERS CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....	2430.29
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 9 OF 10
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
Operating Engineers Local 98 POL Action Committee - Social Action Fund

A. IUOE LOCAL 98 HEALTH AND WELFARE FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HUDSON DRIVE
 PO BOX 1290
 City SOUTHWICK State MA Zip Code 01077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 14002.27

Date of Receipt
 11 / 19 / 2021
Transaction ID : SA11AI.4381
 Amount of Each Receipt this Period
 786.32
 Memo Item
MEMBERS CONTRIBUTIONS

B. IUOE LOCAL 98 HEALTH AND WELFARE FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HUDSON DRIVE
 PO BOX 1290
 City SOUTHWICK State MA Zip Code 01077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify) ▼
 Aggregate Year-to-Date ▼
 15071.34

Date of Receipt
 12 / 07 / 2021
Transaction ID : SA11AI.4382
 Amount of Each Receipt this Period
 1069.07
 Memo Item
MEMBERS CONTRIBUTIONS

C. IUOE LOCAL 98 HEALTH AND WELFARE FUND
 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name
 Mailing Address 40 HUDSON DRIVE
 PO BOX 1290
 City SOUTHWICK State MA Zip Code 01077
 FEC ID number of contributing federal political committee. **C**
 Name of Employer (for Individual) Occupation (for Individual)
 Receipt For:
 Primary General
 Other (specify)
 Aggregate Year-to-Date ▼
 15665.99

Date of Receipt
 12 / 20 / 2021
Transaction ID : SA11AI.4383
 Amount of Each Receipt this Period
 594.65
 Memo Item
MEMBERS CONTRIBUTIONS

SUBTOTAL of Receipts This Page (optional).....	2450.04
TOTAL This Period (last page this line number only).....	9659.02

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Operating Engineers Local 98 POL Action Committee - Social Action Fund

A. KUSTER FOR CONGRESS, INC

Full Name (Last, First, Middle Initial)
Mailing Address PO BOX 1498

City CONCORD State NH Zip Code 03302

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2022
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY
09 / 27 / 2021

FEC Identification Number
C C00462861
Transaction ID : SB23.4385

Amount of Each Disbursement this Period
5000.00

Memo Item

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify)

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement
MM / DD / YYYY

FEC Identification Number
C

Amount of Each Disbursement this Period

Memo Item

SUBTOTAL of Disbursements This Page (optional).....▶	5000.00
TOTAL This Period (last page this line number only).....▶	5000.00