

# 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

United Association Political Education Committee (United Association of Journey-

ADDRESS (number and street) Three Park Place

Check if different than previously reported. (ACC) Annapolis MD 21401

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00012476

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:
- |                                      |   |                                       |  |
|--------------------------------------|---|---------------------------------------|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5)            | <input type="checkbox"/> Aug 20 (M8)  | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input checked="" type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)  | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7)            | <input type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 05 01 2007 through 05 31 2007

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 Assistant Treasurer Patrick R. Perno

Signature of Treasurer Electronically Filed by Assistant Treasurer Patrick R. Perno Date 10 04 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							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

United Association Political Education Committee (United Association of Journey-  
men and A

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		1121309.96
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	1208710.70									
(c) Total Receipts (from Line 19) .....	129491.22	618960.20								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1338201.92	1740270.16								
7. Total Disbursements (from Line 31) .....	92885.00	494953.24								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1245316.92	1245316.92								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

United Association Political Education Committee (United Association of Journeymen and A

Report Covering the Period: From: 

M	M
0	5

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
0	5

D	D
3	1

Y	Y	Y	Y
2	0	0	7

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) .....	1000.00	1255.00
(ii) Unitemized .....	126169.55	601132.62
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	127169.55	602387.62
(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) .....	127169.55	602387.62
12. Transfers From Affiliated/Other Party Committees .....	493.00	2401.00
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	8500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1828.67	5671.58
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)) .....	129491.22	618960.20
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	129491.22	618960.20

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	385.00	48703.24
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	385.00	48703.24
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	67500.00	421250.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	0.00	0.00
29. Other Disbursements.....	25000.00	25000.00
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))..	92885.00	494953.24
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	92885.00	494953.24

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	127169.55	602387.62
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	127169.55	602387.62
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	385.00	48703.24
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	385.00	48703.24

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 6 / 14	
	(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"/> 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)  
United Association Political Education Committee (United Association of Journeyman and A

<b>A.</b>	Full Name (Last, First, Middle Initial) James Aschenbrener		Date of Receipt	
	Mailing Address PO Box 621006		M M / D D / Y Y Y Y 0 5 / 0 4 / 2 0 0 7	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.10448
	Las Vegas	NV	89162	
	FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period	
	C		1000.00	
Name of Employer Retired		Occupation Retired		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Donation Aggregate Year-to-Date ▼ 1000.00		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 14	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input checked="" type="checkbox"/> 12	<input type="checkbox"/> 13
<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)  
 United Association Political Education Committee (United Association of Journeyman and A

**A.**

Full Name (Last, First, Middle Initial) PLUMBERS LOCAL 519 POLITICAL ACTION COMMITTEE		Date of Receipt
Mailing Address 14105 N.W. 58TH COURT		<input type="text" value="05"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
City	State	Zip Code
MIAMI LAKES	FL	33014
FEC ID number of contributing federal political committee.		Transaction ID: SA12.12685
<input type="text" value="C"/> C00143362		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="493.00"/>
Occupation		Transfer
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="1401.00"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="493.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="493.00"/>

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 14	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt
	Mailing Address 1501 Pennsylvania Avenue, NW		<input type="text" value="05"/> / <input type="text" value="31"/> / <input type="text" value="2007"/>
	City	State	Zip Code
	Washington	DC	20013
	FEC ID number of contributing federal political committee.		Transaction ID: SA17.10447
	<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1828.67"/>	
Occupation		Interest for May, 2007	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	
		<input type="text" value="5671.58"/>	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1828.67"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1828.67"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

**A.** Full Name (Last, First, Middle Initial)  
Complete Campaigns, Inc.

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement Subscription  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.10450  
Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

75.00

**B.** Full Name (Last, First, Middle Initial)  
Congressional Quarterly

Mailing Address 1414 22nd Street, NW

City Washingt State DC Zip Code 20037

Purpose of Disbursement Supplies  
Candidate Name

Office Sought:  House  Senate  President  
State: District:

Disbursement For:  Primary  General  
 Other (specify) ▼

Transaction ID: SB21B.10451  
Date of Disbursement

05 / 23 / 2007

Amount of Each Disbursement this Period

310.00

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

385.00

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

385.00

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

A.	Full Name (Last, First, Middle Initial) JASON ALTMIRE	Transaction ID: SB23.10460 Date of Disbursement 05 / 21 / 2007
	Mailing Address 8190 STREAMSIDE DRIVE	Amount of Each Disbursement this Period 5000.00
	City PITTSBURGH State PA Zip Code 15237	
	Purpose of Disbursement Transfer	
	Candidate Name JASON ALTMIRE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) ALTMIRE, JASON	Transaction ID: SB23.10461 Date of Disbursement 05 / 21 / 2007
	Mailing Address 8190 STREAMSIDE DRIVE	Amount of Each Disbursement this Period 5000.00
	City PITTSBURGH State PA Zip Code 15237	
	Purpose of Disbursement Transfer	
	Candidate Name JASON ALTMIRE	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) MICHAEL ANGELO ARCURI	Transaction ID: SB23.10455 Date of Disbursement 05 / 02 / 2007
	Mailing Address 2617 CRESTWAY	Amount of Each Disbursement this Period 5000.00
	City UTICA State NY Zip Code 13501	
	Purpose of Disbursement Transfer	
	Candidate Name MICHAEL ANGELO ARCURI	Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 24	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>CLEAVER, EMANUEL II</b>	<b>Transaction ID:</b> SB23.10453 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
	Mailing Address <b>8217 EAST GREGORY</b>		
	City <b>KANSAS CITY</b> State <b>MO</b> Zip Code <b>64133</b>	Amount of Each Disbursement this Period <b>5000.00</b>	
	Purpose of Disbursement Transfer	Category/ Type	
	Candidate Name <b>CLEAVER, EMANUEL II</b>		
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: <b>MO</b> District: <b>05</b>		
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC CONGRESSIONAL CC</b>	<b>Transaction ID:</b> SB23.10454 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7	
	Mailing Address <b>430 South Capitol SE</b>		
	City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b>	Amount of Each Disbursement this Period <b>2500.00</b>	
	Purpose of Disbursement Transfer	Category/ Type	
	Candidate Name <b>DEMOCRATIC CONGRESSIONAL CC</b>		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>DEMOCRATIC PARTY OF WISCONSIN, COMM</b>	<b>Transaction ID:</b> SB23.10464 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 1 / 2 0 0 7	
	Mailing Address		
	City State Zip Code	Amount of Each Disbursement this Period <b>5000.00</b>	
	Purpose of Disbursement Transfer	Category/ Type	
	Candidate Name <b>DEMOCRATIC PARTY OF WISCONSIN, COMM</b>		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

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

**12500.00**

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) JOAN FITZ-GERALD	Transaction ID: SB23.10457 Date of Disbursement 05 / 08 / 2007
	Mailing Address PO BOX 7438-COAL CREEK CANYON	Amount of Each Disbursement this Period 5000.00
	City GOLDEN State CO Zip Code 80403	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name JOAN FITZ-GERALD	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CO District: 02	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) NATIONAL REPUBLICAN SENATORIAL COMM	Transaction ID: SB23.10459 Date of Disbursement 05 / 21 / 2007
	Mailing Address 425 SECOND STREET NE	Amount of Each Disbursement this Period 15000.00
	City WASHINGTON State DC Zip Code 20002	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name NATIONAL REPUBLICAN SENATORIAL COMM	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Nancy Pelosi for Congress	Transaction ID: SB23.10463 Date of Disbursement 05 / 21 / 2007
	Mailing Address 44 Canal Center Plaza Suite 400	Amount of Each Disbursement this Period 5000.00
	City Alexandria State VA Zip Code 22314	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name Nancy Pelosi for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 08	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

25000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b> Full Name (Last, First, Middle Initial) LORETTA SANCHEZ <hr/> Mailing Address 601 S GLENOAKS BLVD SUITE 211 <hr/> City BURBANK State CA Zip Code 91502 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name LORETTA SANCHEZ <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 47 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10456 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 2 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00
	Category/ Type
	Full Name (Last, First, Middle Initial) Hilda Solis for Congress <hr/> Mailing Address 8665 Wilshire Boulevard #220 <hr/> City Beverly Hills State CA Zip Code 95814 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name Hilda Solis for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Amount of Each Disbursement this Period 5000.00	
Category/ Type	
Full Name (Last, First, Middle Initial) Pete Visclosky for Congress <hr/> Mailing Address P.O. Box 10003 <hr/> City Merrillville State IN Zip Code 46410 <hr/> Purpose of Disbursement Transfer <hr/> Candidate Name Pete Visclosky for Congress <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 01 <hr/> Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10452 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 1 / 2 0 0 7
Amount of Each Disbursement this Period 5000.00	
Category/ Type	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	15000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	67500.00

**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 14 / 14

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

**A.** Full Name (Last, First, Middle Initial)  
REPUBLICAN PARTY OF WISCONSIN

Mailing Address 148 E. Johnson Street

City Madison State WI Zip Code 53703

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.10471

Date of Disbursement

05 / 21 / 2007

Amount of Each Disbursement this Period

5000.00

**B.** Full Name (Last, First, Middle Initial)  
United Association Political Action Fund

Mailing Address 901 Massachusetts Avenue, NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.10468

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

20000.00

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

25000.00

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

25000.00