

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

2006 JUL 18 A 8:58

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT** Example: If typing, type over the lines. 12FE4M5

DAVID A. CARDIMINO

OPERATING ENGINEERS LOCAL 98 SOCIAL ACTION FUND

ADDRESS (number and street) **2 CENTER SQUARE**

P.O. BOX 217

Check if different than previously reported. (ACC)

EAST LONGMEADOW MA 01028-0217

2. **FEC IDENTIFICATION NUMBER** **CITY** **STATE** **ZIP CODE**

C00142083 **NEW (N)** OR **AMENDED (A)**

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report (Q1)

July 15 Quarterly Report (Q2)

October 15 Quarterly Report (Q3)

January 31 Year-End Report (YE)

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

Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P) General (12G) Runoff (12R)

Convention (12C) Special (12S)

Election on [] / [] / [] in the State of []

(d) 30-Day POST-Election Report for the:

General (30G) Runoff (30R) Special (30S)

Election on [] / [] / [] in the State of []

5. Covering Period 04 / 01 / 2006 through 06 / 30 / 2006

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 **PHILIP C. CHAFFEE**

Signature of Treasurer *Philip C. Chaffee* Date 07 / 12 / 2006

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

FE5AN015

26039140353

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

OPERATING ENGINEERS LOCAL 98 SOCIAL ACTION FUND

Report Covering the Period:

From:

04 / 01 / 2006

To:

06 / 30 / 2006

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2006		5 3 1 8 5 7 0
(b) Cash on Hand at Beginning of Reporting Period	5 0 6 3 7 5 5	
(c) Total Receipts (from Line 19)	4 1 4 2 0 7	7 1 7 2 9 9
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	5 4 7 7 9 6 2	6 0 3 5 8 6 9
7. Total Disbursements (from Line 31)	7 5 0 0 0 0	1 3 0 7 9 0 7
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	4 7 2 7 9 6 2	4 7 2 7 9 6 2
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)		



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

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DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

OPERATING ENGINEERS LOCAL 98 SOCIAL ACTION FUND

Report Covering the Period: From: 04 / 01 / 2006 To: 06 / 30 / 2006

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).....		
(ii) Unitemized.....	4 1 4 2.0 7	7 1 7 2.9 9
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶	4 1 4 2.0 7	7 1 7 2.9 9
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶	4 1 4 2.0 7	7 1 7 2.9 9
12. Transfers From Affiliated/Other Party Committees.....		
13. All Loans Received.....		
14. Loan Repayments Received.....		
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17. Other Federal Receipts (Dividends, Interest, etc.).....		
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b))..		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶	4 1 4 2.0 7	7 1 7 2.9 9
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶	4 1 4 2.0 7	7 1 7 2.9 9

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share.....		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....		
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	3,500.00	9,000.00
24. Independent Expenditures (use Schedule E).....		
25. Coordinated Party Expenditures (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 Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	4,000.00	4,079.07
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(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))..	7,500.00	13,079.07
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	7,500.00	13,079.07

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DETAILED SUMMARY PAGE
of Disbursements

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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)	4 1 4 2.0 7	7 1 7 2.9 9
34. Total Contribution Refunds (from Line 28(d))	0.0 0	0.0 0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	4 1 4 2.0 7	7 1 7 2.9 9
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.0 0	0.0 0
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.0 0	0.0 0
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.0 0	0.0 0

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**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	OF
	<input type="checkbox"/> 11a 13	<input type="checkbox"/> 11b 14	<input type="checkbox"/> 11c 15	<input type="checkbox"/> 12 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)

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

Full Name (Last, First, Middle Initial)		Date of Receipt
Mailing Address		<input type="text"/> / <input type="text"/> / <input type="text"/>
City	State	Zip Code
FEC ID number of contributing federal political committee.		Amount of Each Receipt this Period
<input type="text"/>		<input type="text"/>
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	
<input type="text"/>		

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

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**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 6 OF 6
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input checked="" type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 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)
OPERATING ENGINEERS LOCAL 98 SOCIAL ACTION FUND

A.

Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE

Mailing Address
1125 17TH STREET, N.W.

City **WASHINGTON** State **DC** Zip Code **20036**

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
RICHARD E. NEAL

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

State: _____ District: _____

Date of Disbursement
04 / 19 / 2006

Amount of Each Disbursement this Period
1,000.00

B.

Full Name (Last, First, Middle Initial)
ENGINEERS POLITICAL EDUCATION COMMITTEE

Mailing Address
1125 17TH STREET, N.W.

City **WASHINGTON** State **DC** Zip Code **20036**

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name
BERNIE SANDERS

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

State: _____ District: _____

Date of Disbursement
05 / 24 / 2006

Amount of Each Disbursement this Period
2,500.00

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City _____ State _____ Zip Code _____

Purpose of Disbursement

Candidate Name

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

State: _____ District: _____

Date of Disbursement

Amount of Each Disbursement this Period

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

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

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SCHEDULE C (FEC Form 3X)

LOANS

NAME OF COMMITTEE (In Full)

LOAN SOURCE Full Name (Last, First, Middle Initial)		Election: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
Mailing Address		
City	State	ZIP Code
Original Amount of Loan	Cumulative Payment To Date	Balance Outstanding at Close of This Period

TERMS

Date Incurred	Date Due	Interest Rate	Secured:
MM / DD / YYYY	MM / DD / YYYY	_____% (apr)	<input type="checkbox"/> Yes <input type="checkbox"/> No

List All Endorsers or Guarantors (if any) to Loan Source

1. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
2. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
3. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____
4. Full Name (Last, First, Middle Initial)	Name of Employer
Mailing Address	Occupation
City State ZIP Code	Amount Guaranteed Outstanding: _____

SUBTOTALS This Period This Page (optional)	▶	_____
TOTALS This Period (last page in this line only)	▶	_____

Carry outstanding balance only to LINE 3, Schedule D, for this line. If no Schedule D, carry forward to appropriate line of Summary.

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Federal Election Commission
ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS
 The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 7/18/06
<input type="checkbox"/> USPS Priority Mail	Postmarked
Delivery Confirmation™ or Signature Confirmation™ Label <input type="checkbox"/>	
<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

Jr
 PREPARER
 (3/2005)

7/18/06
 DATE PREPARED

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