

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

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

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

ADDRESS (number and street) 534 S Route 73, PO Box 73

Check if different than previously reported. (ACC) Winslow NJ 08095

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C C00173419 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

- Quarterly Report (Q1)
Quarterly Report (Q2)
Quarterly Report (Q3)
Year-End Report (YE) [checked]
Mid-Year Report (MY)
Termination Report (TER)

- (b) Monthly Report Due On:
Feb 20 (M2)
Mar 20 (M3)
Apr 20 (M4)
May 20 (M5)
Jun 20 (M6)
Jul 20 (M7)
Aug 20 (M8)
Sep 20 (M9)
Oct 20 (M10)
Nov 20 (M11)
Dec 20 (M12)
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 10 / 01 / 2015 through 12 / 31 / 2015

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 Kurt Krueger

Signature of Treasurer Kurt Krueger [Electronically Filed] Date 01 / 27 / 2016

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

Table with 11 columns for Office Use Only

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

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="2015"/>	<input type="text" value="120871.79"/>	<input type="text" value="120871.79"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="105763.50"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="118970.45"/>	<input type="text" value="349307.65"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="224733.95"/>	<input type="text" value="470179.44"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="67406.42"/>	<input type="text" value="312851.91"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="157327.53"/>	<input type="text" value="157327.53"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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)

Write or Type Committee Name

United Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

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).....	0.00	0.00
(ii) Unitemized	118838.58	347432.02
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	118838.58	347432.02
(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)	118838.58	347432.02
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	1500.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	131.87	375.63
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))..... ▶	118970.45	349307.65
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	118970.45	349307.65

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	2330.00	63165.41
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	2330.00	63165.41
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	65076.42	249686.50
30. Federal Election Activity (2 U.S.C. §431(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)) ..	67406.42	312851.91
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	67406.42	312851.91

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)	118838.58	347432.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	118838.58	347432.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	2330.00	63165.41
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	2330.00	63165.41

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

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

FOR LINE NUMBER: PAGE 6 OF 16
(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"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17
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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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

A. Colonial Community Bank
Full Name (Last, First, Middle Initial)
Mailing Address 1040 Haddon Avenue
City Collingswood State NJ Zip Code 08108
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼ **327.62**

Date of Receipt
M M / D D / Y Y Y Y Y Y
11 / 12 / 2015
Transaction ID : SA17.8751
Amount of Each Receipt this Period
9.76
INTEREST

B.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

C.
Full Name (Last, First, Middle Initial)
Mailing Address
City State Zip Code
FEC ID number of contributing federal political committee. **C**
Name of Employer Occupation
Receipt For:
 Primary General
 Other (specify) ▼
Aggregate Year-to-Date ▼

Date of Receipt
M M / D D / Y Y Y Y Y Y
Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶	9.76
TOTAL This Period (last page this line number only).....▶	9.76

**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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. Fischer Dorwart, P.C.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Mailing Address 16 W. Vassar Street

Transaction ID : SB21B.8746

City Audubon State NJ Zip Code 08106

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
ACCOUNTANT FEE

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Union Labor Works

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		10		2015

Mailing Address PO Box 394

Transaction ID : SB21B.8745

City New Fairfield State CT Zip Code 06812

Amount of Each Disbursement this Period

830.00

Purpose of Disbursement
WEB HOSTING

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. United States Postal Service

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2015

Mailing Address CMRS-PB
PO BOX 7247-0166

Transaction ID : SB21B.8748

City PHILADELPHIA State PA Zip Code 19170

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
POSTAGE

--

Candidate Name

Category/
Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

2330.00

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

2330.00

**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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. Atlantic County Republican Committee

Mailing Address 3106 Atlantic Avenue

City Atlantic City State NJ Zip Code 08401

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
12 / 16 / 2015

Transaction ID : SB29.8712

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

B. Burlington County Republican Committee

Mailing Address 223 High Street

City Mt Holly State NJ Zip Code 08060

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 14 / 2015

Transaction ID : SB29.8728

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Burzichelli for Assembly

Mailing Address 65 Troy Ave

City Gibbstown State NJ Zip Code 08027

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SB29.8722

Amount of Each Disbursement this Period

1000.00

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

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

2300.00

**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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. Camden County Democrat Committee

Mailing Address 2240 - 15 Route 70 West

City State Zip Code
Cherry Hill NJ 08002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8735

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. Chamber of Commerce of Southern NJ

Mailing Address Piazza 6014 at Main Street

City State Zip Code
Voorhees NJ 08043

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8711

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. Cherry Hill Democratic Party

Mailing Address PO Box 2923

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8731

Amount of Each Disbursement this Period

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

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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. COFFIN & SCAVELLI FOR ASSEMBLY

Mailing Address 597 UNION AVENUE

City NEWFIELD State NJ Zip Code 08344

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2015

Transaction ID : SB29.8726

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Cumberland County Democratic Committee

Mailing Address 44 Euclid Street

City Woodbury State NJ Zip Code 08096

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : SB29.8723

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Democratic Assembly Campaign Committee

Mailing Address 196 West State Street

City Trenton State NJ Zip Code 08608

Purpose of Disbursement CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
12 / 09 / 2015

Transaction ID : SB29.8743

Amount of Each Disbursement this Period

1500.00

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

3500.00

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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. ELECTION FUND OF DERELLA & QUINN

Mailing Address 44 EUCLID STREET

City WOODBURY State NJ Zip Code 08096

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : SB29.8719

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. ELECTION FUND OF JONES & BARCLAY FOR ASSEMBLY

Mailing Address PO BOX 1003

City CAMDEN State NJ Zip Code 08101

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 14 / 2015

Transaction ID : SB29.8729

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Election Fund of Pamela Lampitt

Mailing Address 2240-15 Route 70

City Cherry Hill State NJ Zip Code 08002

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : SB29.8724

Amount of Each Disbursement this Period

300.00

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

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

2900.00

**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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. Gloucester County Democratic Committee

Mailing Address 27 South Broad Street

City Woodbury State NJ Zip Code 08096

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
12 / 09 / 2015

Transaction ID : SB29.8742

Amount of Each Disbursement this Period

2000.00

Full Name (Last, First, Middle Initial)

B. Moriarty for Assembly

Mailing Address PO Box 1368

City Blackwood State NJ Zip Code 08012

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 07 / 2015

Transaction ID : SB29.8721

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Mosquera for Assembly

Mailing Address PO Box 1368

City Blackwood State NJ Zip Code 08012

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
10 / 21 / 2015

Transaction ID : SB29.8732

Amount of Each Disbursement this Period

1000.00

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

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

4500.00

**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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. New Jerseyans for a Better Tomorrow

Mailing Address Po Box 4740

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8725

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. New Jerseyans for a Better Tomorrow

Mailing Address Po Box 4740

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8736

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. New Jerseyans for a Better Tomorrow

Mailing Address Po Box 4740

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8737

Amount of Each Disbursement this Period

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

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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. New Jerseyans for a Better Tomorrow

Mailing Address Po Box 4740

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
12 / 16 / 2015

Transaction ID : SB29.8714

Amount of Each Disbursement this Period

10000.00

Full Name (Last, First, Middle Initial)

B. NJ Senate Democratic Majority

Mailing Address PO Box 3540

City State Zip Code
Cherry Hill NJ 08034

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
11 / 25 / 2015

Transaction ID : SB29.8738

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. NJ State AFL-CIO

Mailing Address 106 W State Street

City State Zip Code
Trenton NJ 08608

Purpose of Disbursement
4TH QUARTER 2015

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /
10 / 07 / 2015

Transaction ID : SB29.8718

Amount of Each Disbursement this Period

514.15

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

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

11514.15

**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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. NJ State Association of Pipe Trades PAC Fund

Mailing Address 534 S. Route 73, PO Box 73

City Winslow State NJ Zip Code 08095

Purpose of Disbursement
SEPTEMBER, 2015

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8717

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. NJ State Association of Pipe Trades PAC Fund

Mailing Address 534 S. Route 73, PO Box 73

City Winslow State NJ Zip Code 08095

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8734

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. NJ State Association of Pipe Trades PAC Fund

Mailing Address 534 S. Route 73, PO Box 73

City Winslow State NJ Zip Code 08095

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.8740

Amount of Each Disbursement this Period

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

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 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 Assn Journeymen & Apprent of Plumb & Pipefitting Ind Local 322 Comm for Pol Ed

Full Name (Last, First, Middle Initial)

A. UA PEC United Association

Mailing Address Three Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
SEPTEMBER, 2015

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
10 / 07 / 2015

Transaction ID : SB29.8715

Amount of Each Disbursement this Period

5204.95

Full Name (Last, First, Middle Initial)

B. UA PEC United Association

Mailing Address Three Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
NOVEMBER, 2015

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
11 / 04 / 2015

Transaction ID : SB29.8733

Amount of Each Disbursement this Period

5226.45

Full Name (Last, First, Middle Initial)

C. UA PEC United Association

Mailing Address Three Park Place

City Annapolis State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
12 / 02 / 2015

Transaction ID : SB29.8739

Amount of Each Disbursement this Period

6184.51

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

16615.91

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

65076.42