

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

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
880 PA

ADDRESS (number and street) 12298 TOWNSEND ROAD

Check if different than previously reported. (ACC)

PHILADELPHIA PA 19154

2. **FEC IDENTIFICATION NUMBER** C00174847

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 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 (12G)	

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)
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Election on _____ in the State of _____

5. Covering Period 07 01 2006 through 09 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 Daniel H. Grace

Signature of Treasurer Electronically Filed by Daniel H. Grace Date 10 13 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							
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><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>6</td></tr></table>	Y	Y	Y	Y	2	0	0	6		217873.08
Y	Y	Y	Y							
2	0	0	6							
(b) Cash on Hand at Beginning of Reporting Period	220005.37									
(c) Total Receipts (from Line 19)	23871.08	57182.63								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	243876.45	275055.71								
7. Total Disbursements (from Line 31)	65796.54	96975.80								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	178079.91	178079.91								
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

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	6

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	6

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	0.00	0.00
(i) Itemized (use Schedule A)	17112.00	52500.02
(ii) Unitemized	17112.00	52500.02
(iii) TOTAL (add Lines 11(a)(i) and (ii)	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	17112.00	52500.02
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	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	6759.08	4682.61
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))	23871.08	57182.63
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	23871.08	57182.63

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) 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.....	4691.54	19060.80
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4691.54	19060.80
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	50000.00	50000.00
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	5.00	5.00
(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))	5.00	5.00
29. Other Disbursements.....	11100.00	27910.00
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))..	65796.54	96975.80
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	65796.54	96975.80

DETAILED SUMMARY PAGE
of Disbursements

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)	17112.00	52500.02
34. Total Contribution Refunds (from Line 28(d))	5.00	5.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	17107.00	52495.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4691.54	19060.80
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4691.54	19060.80

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 / 18
	<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	

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)
**BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
 830 PA**

A. Full Name (Last, First, Middle Initial) The Vanguard Group Mailing Address P.O. Box 1110 City State Zip Code Valley Forge PA 19482 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 07 31 2006 Transaction ID: SA17.5414 Amount of Each Receipt this Period 629.56 Mutual fund dividend
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 629.56		

B. Full Name (Last, First, Middle Initial) The Vanguard Group Mailing Address P.O. Box 1110 City State Zip Code Valley Forge PA 19482 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 08 31 2006 Transaction ID: SA17.5415 Amount of Each Receipt this Period 633.79 Mutual fund dividend
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1263.35		

C. Full Name (Last, First, Middle Initial) The Vanguard Group Mailing Address P.O. Box 1110 City State Zip Code Valley Forge PA 19482 FEC ID number of contributing federal political committee. C		Date of Receipt M M / D D / Y Y Y Y Y 09 30 2006 Transaction ID: SA17.5416 Amount of Each Receipt this Period 618.53 Mutual fund dividend
Name of Employer Occupation Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 1881.88		

SUBTOTAL of Receipts This Page (optional)	1881.88
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 18	
	(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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NAME OF COMMITTEE (In Full)
**BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
 830 PA**

A. Full Name (Last, First, Middle Initial)
 The Vanguard Group

Mailing Address P.O. Box 1110

City State Zip Code
 Valley Forge PA 19482

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 6733.71

Date of Receipt
 M M / D D / Y Y Y Y
 09 / 30 / 2006

Transaction ID: SA17.5417

Amount of Each Receipt this Period
 4851.83

Net appreciation - mutual
 fd 7/1-9/30/06

SUBTOTAL of Receipts This Page (optional)	4851.83
TOTAL This Period (last page this line number only)	6733.71

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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. A & M Truck & Tire Service

Mailing Address 612 Wm. Leigh Drive

City Tullytown State PA Zip Code 19007

Purpose of Disbursement
Road service for freightliner

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5361

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

107.00

Full Name (Last, First, Middle Initial)

B. Century Truck and Trailer

Mailing Address 2200 Castor Avenue

City Philadelphia, State PA Zip Code 19134

Purpose of Disbursement
Repairs for tractor

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5359

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

210.00

Full Name (Last, First, Middle Initial)

C. Kaholyn Group Inc.

Mailing Address 96 Cameron Drive

City Holland State PA Zip Code 18966

Purpose of Disbursement
Printing of DRIVE cards

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5358

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

472.90

SUBTOTAL of Disbursements This Page (optional) ►

789.90

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 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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial) A. M.O. Fuel Inc.		Transaction ID: SB21B.5356	
Mailing Address 2762 US Route 1		Date of Disbursement 07 / 20 / 2006	
City Trevose	State PA	Zip Code 19047	Amount of Each Disbursement this Period 119.48
Purpose of Disbursement Fuel for tractor		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. M.O. Fuel Inc.		Transaction ID: SB21B.5365	
Mailing Address 2762 US Route 1		Date of Disbursement 09 / 20 / 2006	
City Trevose	State PA	Zip Code 19047	Amount of Each Disbursement this Period 294.00
Purpose of Disbursement Fuel for tractor		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Novak/Francellia LLC		Transaction ID: SB21B.5366	
Mailing Address Two Bala Plaza, Suite 501		Date of Disbursement 09 / 20 / 2006	
City Bala Cynwyd	State PA	Zip Code 19004	Amount of Each Disbursement this Period 2850.00
Purpose of Disbursement 12/31/05 fin. stmt audit & 1120POL prep		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	3263.48
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 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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Teamsters Local Union #830

Mailing Address 12298 Townsend Road

City Philadelphia, State PA Zip Code 19154

Purpose of Disbursement
Reimb. members dues 06/2006

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5357

Date of Disbursement

07 / 26 / 2006

Amount of Each Disbursement this Period

100.00

Full Name (Last, First, Middle Initial)

B. Teamsters Local Union #830

Mailing Address 12298 Townsend Road

City Philadelphia, State PA Zip Code 19154

Purpose of Disbursement
Dues included with DRIVE (Aramark)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5362

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

20.00

Full Name (Last, First, Middle Initial)

C. Teamsters Local Union #830

Mailing Address 12298 Townsend Road

City Philadelphia, State PA Zip Code 19154

Purpose of Disbursement
Dues included with DRIVE (Aramark 7/06)

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5363

Date of Disbursement

08 / 24 / 2006

Amount of Each Disbursement this Period

80.00

SUBTOTAL of Disbursements This Page (optional) ▶

200.00

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)

PAGE 11 / 18

<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Teamsters Local Union #830

Mailing Address 12298 Townsend Road

City Philadelphia, State PA Zip Code 19154

Purpose of Disbursement
Postage reimbursement for 8/16 mailing

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5364

Date of Disbursement

08 / 30 / 2006

Amount of Each Disbursement this Period

204.16

Full Name (Last, First, Middle Initial)

B. Teamsters Local Union #830

Mailing Address 12298 Townsend Road

City Philadelphia, State PA Zip Code 19154

Purpose of Disbursement
Reimburse members dues

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.5371

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

70.00

SUBTOTAL of Disbursements This Page (optional)

274.16

TOTAL This Period (last page this line number only)

4527.54

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)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. The Lantern Project

Mailing Address 1735 Market Street
Suite A-25

City Philadelphia State PA Zip Code 19103

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2006
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB23.5375

Date of Disbursement

/ /

Amount of Each Disbursement this Period

50000.00

SUBTOTAL of Disbursements This Page (optional)

50000.00

TOTAL This Period (last page this line number only)

50000.00

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 13 / 18

<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Bill Keller for State Representative

Mailing Address 1935 S. Galloway Street

City Philadelphia State PA Zip Code 19148

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5388

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Citizens to Elect Mike O'Brien

Mailing Address 212 Fairmount Avenue

City Philadelphia State PA Zip Code 19123

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5385

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. FCPDCEC

Mailing Address P.O. Box 22480

City Philadelphia State PA Zip Code 19110

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5382

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Friends of George Kenney

Mailing Address P.O. Box 11524

City Philadelphia State PA Zip Code 19116

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5384

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. Friends of Jack Hansen

Mailing Address 844 Knapp Road

City Lansdale State PA Zip Code 19446-3136

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5395

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Friends of Jennifer Mann

Mailing Address P.O. Box 1881

City Allentown State PA Zip Code 18105

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5387

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Friends of John Perzel Committee

Mailing Address P.O. Box 28572

City Philadelphia, State PA Zip Code 19149-9966

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5397

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Friends of John Sabatina

Mailing Address 8012 Castor Avenue

City Philadelphia, State PA Zip Code 19152

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5400

Date of Disbursement

09 / 27 / 2006

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. Friends of Linda Minger

Mailing Address P.O. Box 802

City Allentown, State PA Zip Code 18105-0802

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5392

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial) A. Friends to Elect Anne Crowley		Transaction ID: SB29.5390 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address P.O. Box 565		Amount of Each Disbursement this Period 500.00
City Paoli State PA Zip Code 19301	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. Friends to Elect Mike McGeehan		Transaction ID: SB29.5398 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 6 / 2 0 0 6
Mailing Address 4401 Cottman Avenue		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19135	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. People for Doyle		Transaction ID: SB29.5377 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 2 / 2 0 0 6
Mailing Address 101 1/2 Washington Ave		Amount of Each Disbursement this Period 600.00
City Elsmere State DE Zip Code 19805	Purpose of Disbursement Contribution Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:		
Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	2100.00
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)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Philadelphia Council-AFL/CIO (PAC)

Mailing Address 22 S. 22nd Street

City Philadelphia, State PA Zip Code 19103

Purpose of Disbursement
1/2 page ad

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5399

Date of Disbursement

09 / 13 / 2006

Amount of Each Disbursement this Period

300.00

B. Pleasantville Democratic Club

Mailing Address P.O. Box 007

City Pleasantville, State NJ Zip Code 08232

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5394

Date of Disbursement

09 / 06 / 2006

Amount of Each Disbursement this Period

1000.00

C. Republican City Committee

Mailing Address The Windsor Lower Level
1700 Parkway

City Philadelphia, State PA Zip Code 19103-2790

Purpose of Disbursement
20 tickets for fundraiser

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5379

Date of Disbursement

08 / 02 / 2006

Amount of Each Disbursement this Period

1700.00

SUBTOTAL of Disbursements This Page (optional) ▶

3000.00

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

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<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)

BREWERY SOFT DRINK BEER DISTR OPTICAL DENTAL MISC WORKERS WAREHOUSEMAN HELP LOCAL
830 PA

Full Name (Last, First, Middle Initial)

A. Rick Taylor for State Representative

Mailing Address P.O. Box 866

City Ambler State PA Zip Code 19002-0866

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5380

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

11100.00