Image# 201604159012492401				PAGE 1 / 10
	EPORT OF F ND DISBURS Other Than An Author	SEMENTS	Office	
1. NAME OF TYP	PE OR PRINT V	Example: If typing, type		
COMMITTEE (in full)		over the lines.	12FE4M5	
			EDU. ACTION P	ROGRAM - PAC
ADDRESS (number and street)	01 3RD STREET NW			
Check if different				
them mreutiously	WASHINGTON		DC 2000	1
2. FEC IDENTIFICATION NUME		<b>A</b>	STATE 🔺	ZIP CODE
C C00164509	3. IS <sup>-</sup> REI	THIS X NEW PORT X (N) OF	AMENDED (A)	
<ul> <li><b>4. TYPE OF REPORT</b> (Choose One)</li> <li>(a) Quarterly Reports:</li> </ul>	(b) Monthly Report Due On: Mar 20			Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12) (Non-Election Year Only)
April 15 Quarterly Papart (01)	Apr 20	) (M4) Jul 20 (M7)	Oct 20 (M10)	Jan 31 (YE)
Quarterly Report (Q1) July 15 Quarterly Report (Q2)	(c) 12-Day PRE-Election	Primary (12P)	General (12G)	Runoff (12R)
October 15 Quarterly Report (Q3)	Report for the:	Convention (12C)	Special (12S)	
January 31 Year-End Report (YE)	Election	on M M / D D /	Y Y Y Y Y	in the State of
July 31 Mid-Year Report (Non-election Year Only) (MY)	(d) 30-Day <b>POST</b> -Election Report for the:	General (30G)	Runoff (30R)	Special (30S)
Termination Report (TER)	Election	on / D = D /		in the State of
5. Covering Period 01	01 / YTYTY 01 2016	through 03		Y Y 16
I certify that I have examined this R	eport and to the best of m	y knowledge and belief it is	true, correct and comple	ete.
Type or Print Name of Treasurer	PAUL SHEARON			
Signature of Treasurer PAUL SH	EARON	[Electronically Filed]	Date 04 / 15	D / Y Y Y Y 2016
NOTE: Submission of false, erroneous	, or incomplete information r	nay subject the person signing	this Report to the penalt	ies of 2 U.S.C. §437g.
Office Use Only				<b>FORM 3X</b> Rev. 12/2004

04/15/2016 17 : 07

#### SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
6.	(a) Cash on Hand January 1, 2016		34744.40
	(b) Cash on Hand at Beginning of Reporting Period	34744.40	
	(c) Total Receipts (from Line 19)	9050.45	9050.45
	<ul> <li>(d) Subtotal (add Lines 6(b) and</li> <li>6(c) for Column A and Lines</li> <li>6(a) and 6(c) for Column B)</li> </ul>	43794.85	43794.85
7.	Total Disbursements (from Line 31)	11373.58	11373.58
8.	Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	32421.27	32421.27
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

## **DETAILED SUMMARY PAGE**

of Receipts

Page 3

Write or Type Committee Name

FEC Form 3X (Rev. 06/2004)

Report Covering the Period: From: 01	/ D D / Y Y Y Y 01 2016 To	b: 03 / D D / Y Y Y 31 2016
I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1. Contributions (other than loans) From: (a) Individuals/Persons Other		
Than Political Committees (i) Itemized (use Schedule A)	100.00	100.00
(ii) Unitemized (iii) TOTAL (add	8950.45	8950.45
Lines 11(a)(i) and (ii)	9050.45	9050.45
<ul><li>(b) Political Party Committees</li><li>(c) Other Political Committees</li></ul>	0.00	0.00
(such as PACs)(d) Total Contributions (add Lines	0.00	0.00
11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)▶	9050.45	9050.45
Transfers From Affiliated/Other Party Committees	0.00	0.00
All Loans Received	0.00	0.00
Loan Repayments Received Offsets To Operating Expenditures	0.00	0.00
(Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) Refunds of Contributions Made	0.00	0.00
to Federal Candidates and Other Political Committees Other Federal Receipts	0.00	0.00
(Dividends, Interest, etc.) Transfers from Non-Federal and Levin Funds (a) Non-Federal Account	0.00	0.00
(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
. Total Receipts (add Lines 11(d),		
12, 13, 14, 15, 16, 17, and 18(c))▶	9050.45	9050.45
. Total Federal Receipts (subtract Line 18(c) from Line 19)	9050.45	9050.45

# DETAILED SUMMARY PAGE

of Disbursements

	FEC Form 3X (Rev. 02/2003)	COLUMN A	Page 4
	II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
1.	Dperating Expenditures: (a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
	(b) Other Federal Operating Expenditures	0.00	0.00
	c) Total Operating Expenditures		
	(add 21(a)(i), (a)(ii), and (b))► Transfers to Affiliated/Other Party	0.00	0.00
	Committees Contributions to	2980.00	2980.00
į	Federal Candidates/Committees and Other Political Committees	7500.00	7500.00
	ndependent Expenditures (use Schedule E) Coordinated Party Expenditures	0.00	0.00
	Coordinated Party Expenditures (2 U.S.C. §441a(d)) use Schedule F)	0.00	0.00
	_oan Repayments Made	0.00	0.00
	_oans Made	0.00	0.00
	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
	Other Disbursements	893.58	893.58
	Federal Election Activity (2 U.S.C. §431(20)) (a) Allocated Federal Election Activity		
	(from Schedule H6)	0.00	
	(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
	Total Disbursements (add Lines 21(c), 22,		
	23, 24, 25, 26, 27, 28(d), 29 and 30(c))	11373.58	11373.58
	Total Federal Disbursements		
	(subtract Line 21(a)(ii) and Line 30(a)(ii)	11373.58	11373.58

FE6AN026

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### DETAILED SUMMARY PAGE

of Disbursements

II. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
. Total Contributions (other than loans) (from Line 11(d), page 3)	9050.45	9050.45
. Total Contribution Refunds (from Line 28(d))	0.00	0.00
. Net Contributions (other than loans) (subtract Line 34 from Line 33)	9050.45	9050.45
Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))►	0.00	0.00
Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

#### Image# 201604159012492406

SCHEDULE A	(FEC Form 3X)
ITEMIZED REC	EIPTS

## Use separate schedule(s) for each category of the

FOR LINE NUMBER:

(check only one)

PAGE 6 OF

10

ITEMIZED RECEIPTS		for each category of the Detailed Summary Page	X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and or for commercial purposes, other than using			erson for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) INT'L FED. OF PROFESSIONAL	AND TECHN	ICAL ENGINEERS LEG. I	EDU. ACTION PROGRAM - PAC
Full Name (Last, First, Middle Initial)         SUSAN GAY HENSON         Mailing Address 54 N CREST ROAD         City         CHATTANOOGA         FEC ID number of contributing federal political committee.         Name of Employer         TVA         Receipt For:         Primary       General         Other (specify)	State TN C Occupation NUCLEAR Aggregate		Date of Receipt
Full Name (Last, First, Middle Initial)         Mailing Address         City         FEC ID number of contributing federal political committee.         Name of Employer         Receipt For:         Primary       General         Other (specify) ▼	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt
Full Name (Last, First, Middle Initial)         Mailing Address         City         FEC ID number of contributing federal political committee.         Name of Employer         Receipt For:         Primary       General         Other (specify) ▼	State C Occupation Aggregate	Zip Code Year-to-Date ▼	Date of Receipt
SUBTOTAL of Receipts This Page (optional)			100.00

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

7

Image# 201604159012492407

S	CHEDULE B (FEC Form 3X)		F	OR	LINE	IE NUMBER: PAGE 7 OF 10										
IT	EMIZED DISBURSEMENTS	Use separate schedule(s for each category of the			ck only	y o	ne)		05 00							
		Detailed Summary Page			21b 27		22 28a		23 28b		24 28c	25 29	26 30b			
	y information copied from such Reports and Stater for commercial purposes, other than using the nan															
$\square$	NAME OF COMMITTEE (In Full)															
	INT'L FED. OF PROFESSIONAL AND T	EC	G. EC		. ACT	101	N PR	OG	GRAM -	PAC						
Α.	Full Name (Last, First, Middle Initial) ASSOCIATION OF ADMINISTRATIVE LAW JUDGE COMMITTEE	ES, IFPTE, AFL-CIO POLITI	CAL AC	стіс	ON		Date c			-	-	V	V			
	Mailing Address 277 PARKER AVENUE					03 01 2016										
	City S BUFFALO Purpose of Disbursement	State Zip Code NY 14214	1				Tran	sact	ion ID	: SI	B22.9577					
	PAYROLL DEDUCTION JUN 2015-JAN 2016						Amour	nt of	Each	Disl	bursemer	nt this	Period			
	Candidate Name		Cat T	ego ype					,		7	2980	00			
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼					Me	emo I	ltem							
	State: District:															
В.	Full Name (Last, First, Middle Initial)						Date c	of Di	sburse	emer	nt					
							M M	/	D	D	/ Y	Y Y	Y			
	Mailing Address															
	City	State Zip Code														
	Purpose of Disbursement						Amount of Each Disbursement this Period									
	Candidate Name		Category/													
	Office Sought: House Disburser	ment For:	T	уре	)	Memo Item										
	Senate President	Primary General Other (specify)														
	State: District:															
C.	Full Name (Last, First, Middle Initial)						Date c	of Di								
	Mailing Address								D	D	/ T =	ΥΥ	T			
	City	State Zip Code														
	Purpose of Disbursement															
	Candidate Name		Cat T	ego īype			Amour	nt of	Each	Disl	bursemer	nt this	Period			
	Office Sought: House Disburser Senate President	nent For: Primary General Other (specify) ▼					Me	mo l	ltem		,					
_	State: District:															
s	UBTOTAL of Disbursements This Page (optional)				• •			_	7		7	2980	.00			
т	OTAL This Period (last page this line number only)	)			•		L		,		7	2980	.00			

SC	HEDULE B (FEC Form 3X)				PAGE 8 OF 10								
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	y information copied from such Reports and Staten for commercial purposes, other than using the nam												
$\left  \right\rangle$	NAME OF COMMITTEE (In Full)												
	INT'L FED. OF PROFESSIONAL AND T		NGINEER	S LEG. ED	U. ACTION PROGRAM - PAC								
Α.	Full Name (Last, First, Middle Initial) BONNIE WATSON COLEMAN FO		<b>66</b>		Date of Disbursement								
		IN CONGINE	00		M M / D D / Y Y Y Y								
	Mailing Address 180 UPLAND AVENUE				03 03 2016								
	City S EWING	State Zip C NJ 0863			Transaction ID : SB23.9561								
	Purpose of Disbursement CONTRIBUTION				Amount of Each Disbursement this Period								
	Candidate Name			Category/ Type	3000.00								
	Senate	nent For: 2016 Primary Other (specify) _	General		Memo Item								
	State: NJ District: 12		, ,										
	Full Name (Last, First, Middle Initial)												
В.	DONALD M PAYNE JR FOR CON	GRESS			Date of Disbursement								
	Mailing Address PO BOX 2406				03 / D D / Y Y Y Y Y 30 2016								
	City S NEWARK	State Zip C NJ 071			Transaction ID : SB23.9562								
	Purpose of Disbursement CONTRIBUTION				Amount of Each Disbursement this Period								
	Candidate Name			Category/ Type	500.00								
	Senate X	nent For: 2016 Primary Other (specify)	General		Memo Item								
	State: NJ District: 10												
C.	Full Name (Last, First, Middle Initial)	GRESS			Date of Disbursement								
	Mailing Address PO BOX 160				01 / D D / Y Y Y Y Y 29 2016								
	City S COLLINGSWOOD	State Zip C NJ 0810			Transaction ID : SB23.9557								
	Purpose of Disbursement CONTRIBUTION												
	Candidate Name			Category/	Amount of Each Disbursement this Period								
		nent For: 2016 Primary Other (specify)	General	Туре	Memo Item								
s	UBTOTAL of Disbursements This Page (optional)			••••••	4500.00								
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SCHEDULE B (FEC Form 3X)								=R·				PA	GE	9	OF 10	
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$\setminus$	NAME OF COMMITTEE (In Full)								~ •		~ ~ ~					
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<u> </u>	Full Name (Last, First, Middle Initial)															
Α.	MARK TAKAI FOR CONGRESS		Date	e of	Disl	burse	ement									
	Mailing Address PO BOX 2267						03 / D D / Y Y Y Y 03 01 2016									
	PEARL CITY	State HI	Zip Code 96782				Tra	ansa	nctio	on ID	: SB	23.9	559			
	Purpose of Disbursement CONTRIBUTION						Amo	ount	of E	Each	Disb	urse	ment	t this	Period	
	Candidate Name			Cate Ty	egor ype	ry/				, ,				1000.	00	
	Office Sought: X House Disburser Senate President X	ment For: Primary Other (spe	General					Mem	no Ite	em						
	State: HI District: 01															
В.	Full Name (Last, First, Middle Initial) MIKE HONDA FOR CONGRESS								Disl	burse						
	Mailing Address C/O CONTRIBUTION SOLUTION 123 E. SAN CARLOS ST., #531	S, LLC						03 01 2016								
	SÁN JOSE	State CA	Zip Code 95112				Transaction ID : SB23.9560									
	Purpose of Disbursement CONTRIBUTION						Amount of Each Disbursement this Period									
	Candidate Name			Cate Ty	egor ype	ry/				,		7		1000.	.00	
		nent For: Primary Other (spe	General				Memo Item									
с.	Full Name (Last, First, Middle Initial) SCOTT FOR CONGRESS						Date	e of	Disl	burse	ement					
	Mailing Address POST OFFICE BOX 251							)3	/	D 1				016	Y	
	NEWPORT NEWS	State VA	Zip Code 23607				Tra	ansa	actio	on ID	: SB	23.9	568			
	Purpose of Disbursement CONTRIBUTION Candidate Name						Amo	ount	of E	Each	Disb	urse	ment	t this	Period	
	Caldudate Name			Cate T	egor ype	ry/	1000.0							00		
	Office Sought: House Disburser Senate President State: VA District: 03	2016 General ecify) ▼		<u>, , , , , , , , , , , , , , , , , , , </u>			Mem	no Ite	em		7					
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In detailed Summary Page     21b     22b     20b     2		· · · · · ·			heck	only o	nly one)									
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions from such committee.       NAME OF Contributions from such committee.         NAME OF COMMITTEE (in Full)       NAME OF COMMITTEE (in Full)         NATE OF COMMITTEE (in Full)       NAME OF COMMITTEE (in Full)         NAME OF COMMITTEE (in Full)       Date of Disbursement         Mailing Address PD B0X 2666       City         City       State       Zip Code         Purpose of Disbursement       Control (in full)         Control (in full)       Mount of Each Disbursement         Control (in full)       Mount of Each Disbursement         Control (in full)       Purpose of Disbursement         Control (in full)       Other (specify)       State         Full Name (Last, First, Middle Initial)       Date of Disbursement         Batter:       Disbursement For:       2016         City       State       Zip Code         Purpose of Disbursement       City       State         City       State       Zip Code         Purpose of Disbursement       Disbursement For:         City       State       Zip Code         Purpose of Disbursement       Disbursement For:       City         State:       Disbursement       City <th></th> <th></th> <th>Detailed Summary Page</th> <th></th> <th></th> <th>L</th> <th></th> <th></th> <th></th> <th></th> <th></th> <th></th>			Detailed Summary Page			L										
INTL FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC         Full Name (Last, First, Middle Initial)         A. NELLIE POU FOR SENATE         Mailing Address         City         Paterson         Nu         Contribution         Contrel Each Disbursement      <	An or	y information copied from such Reports and Staten for commercial purposes, other than using the name	I ments may not be sold or us ne and address of any politi	sed by cal con	any	persor	for the	purpo	ose o	f soliciting	g contribu	tions				
✓       Full Name (Last, First, Middle Initial)         A. NELLIE POU FOR SENATE       Date of Disbursement         Mailing Address       City         PATERSON       NJ         Purpose of Disbursement       Control Each Disbursement         Control Each Disbursement       Category         Office Sought:       House         Bate       Disbursement For: 2016         President       Other (specify)         State:       Disfurition         Purpose of Disbursement       Category         Office Sought:       House         State:       Disfurition         President       Category/         Office Sought:       House         Disfurition:       State         Office Sought:       House         President       Disfurition:         State:       Disfurition:         Office Sought:       House         President       Other (specify)         Full Name (Last, First, Middle Initial)       Amount of Each Disbursement this Period         Category/       Type         Office Sought:       House         President       Other (specify)         State:       Disbursement         Office Sought:       Hous	$\setminus$															
A. NELLIE POU FOR SENATE       Date of Disbursement         Mailing Address       City       State       Zip Code         PATERSON       NJ       07509       Transaction ID : SB29.9573         Purpose of Disbursement       Category/       500.00       Memo Item         Control Lest, First, Middle Initial)       Disbursement For:       2016       Memo Item         State:       Disbursement For:       2016       Memo Item         Purpose of Disbursement       Other (specify)       Date of Disbursement file       Son.00         Office Sought:       Senate       President       Other (specify)       Memo Item         Amount of Each Disbursement       Other (specify)       Memo Item       Memo Item         Amount of Each Disbursement       Category/       Image: Category/       Image: Category/         Office Sought:       House       Disbursement For:       Other (specify)       Memo Item         City       State       Disbursement For:       Disbursement       Memo Item         State:       Disbursement For:       Other (specify)       Date of Disbursement       Memo Item         Mailing Address       City       State       Zip Code       Memo Item       Memo Item         Office Sought:       House <t< td=""><td></td><td>INT'L FED. OF PROFESSIONAL AND T</td><td>TECHNICAL ENGINEE</td><td>ERSL</td><td>EG.</td><td>. EDl</td><td>J. ACT</td><td>ION</td><td>PR</td><td>OGRAN</td><td>1 - PAC</td><td></td></t<>		INT'L FED. OF PROFESSIONAL AND T	TECHNICAL ENGINEE	ERSL	EG.	. EDl	J. ACT	ION	PR	OGRAN	1 - PAC					
Nulling Address PO BOX 2696       03       00       2016         City       State       Zip Code       Transaction ID: SE29.9573         Purpose of Diabursement       Category/       State       Diabursement this Period         Contribution       Category/       State       Zip Code         Office Sought:       House       Disbursement For: 2016       Memo Item         State:       Disbursement       Other (specify) ◆       Memo Item         Mailing Address       City       State       Zip Code         Purpose of Diabursement       Diabursement For:       Amount of Each Diabursement this Period         Category/       Type       Memo Item         Mailing Address       Diabursement For:       Amount of Each Diabursement this Period         City       State       Diabursement For:       Memo Item         Office Sought:       House       Diabursement For:       Memo Item         President       Diabursement For:       Category/       Memo Item         State:       District:       President       Amount of Each Diabursement his Period         City       State       Zip Code       Amount of Each Diabursement his Period         City       State       Zip Code       Amount of Each Diabursement his Period <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td>																
Mailing Address PO BOX 2596       03       10       2016         City       State       Zip Code       Transaction ID : 5829.9573         PATERSON       NJ       07508       Amount of Each Disbursement this Period         Candidate Name       Category       Yupose of Disbursement For: 2016       Memo Item         State       Disbursement       Frinary       General       Memo Item         State       Distorement       Other (specify)       Image: Category       Memo Item         State:       Disbursement       Frist, Middle Initial)       Date of Disbursement this Period         City       State       Zip Code       Maount of Each Disbursement this Period         Candidate Name       Disbursement       Category       Mailing Address         City       State       Zip Code       Memo Item         Purpose of Disbursement       Disbursement For:       Memo Item       Memo Item         State:       Disbursement For:       Memo Item       Memo Item       Memo Item         Full Name (Last, First, Middle Initial)	А.	NELLIE POU FOR SENATE														
PATERSON     NJ     07509       Purpose of Disbursement Candidate Name     Disbursement this Period       Office Sought:     House President       State:     District:       Office Sought:     House President       State:     District:       Office Sought:     House President       Office Sought:     House President       City     State       Zip Code       Purpose of Disbursement       City     State       Disbursement       Category/ Type       Office Sought:     House President       Disbursement       City     State       Disbursement       City     State       Disbursement       City     State       Disbursement       Office Sought:     House President       Disbursement       City     State       Disbursement       City     State       Office Sought:     House President       Disbursement     Category/ Type       Office Sought:<		Mailing Address PO BOX 2696														
CÓNTRIBUTION       Amount of Each Disbursement this Period         Cardidate Name       Senate       Primary       General         Office Sought:       House       Disbursement For: 2016       Memo item         State:       District:       Disbursement       Disbursement         Gity       State       Zip Code         Purpose of Disbursement       Category/ Type       Amount of Each Disbursement this Period         City       State       Zip Code         Purpose of Disbursement       Category/ Type       Amount of Each Disbursement this Period         City       State       Disbursement for: Senate       Memo item         Full Name (Last, First, Middle Initial)       Memo item       Memo item         State:       Disbursement       Memo item       Memo item         City       State       Zip Code       Memo item         Full Name (Last, First, Middle Initial)       Date of Disbursement       Memo item         City       State       Zip Code       Memo item         Purpose of Disbursement       Category/ Type       Amount of Each Disbursement this Period         City       State       Zip Code       Memo item         Office Sought:       House       Disbursement For: President       Amount of Each Disb		PATERSON					Trans	sactio	on ID	: SB29.9	573					
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<b>3.</b> Date of Disbursement   Mailing Address City   City State   Purpose of Disbursement   Candidate Name   Office Sought:   House   Disbursement For:   Senate   President   Other (specify)   Date of Disbursement Memo Item Memo Item Memo Item Amount of Each Disbursement this Period Category/ Type Office Sought: House Disbursement For: City State Zip Code Purpose of Disbursement City State Zip Code Purpose of Disbursement City State Zip Code Purpose of Disbursement City State Disbursement City State Disbursement Cardidate Name Office Sought: House Disbursement For: Senate Purpose of Disbursement Cardidate Name Office Sought: House Disbursement For: Senate President Other (specify)  Other (specify)  State: District: Disbursement For: Senate President Other (specify)  Other (specify)  State: District: Disbursement For: Senate President Other (specify)  Other (specify)  State: District:																
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