

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
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

ADDRESS (number and street) 501 3rd Street NW
Suite 701
 Check if different than previously reported. (ACC)
Washington DC 20001

2. **FEC IDENTIFICATION NUMBER** C00164509
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:
 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 (12G)
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 01 01 2009 through 06 30 2009

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 Paul Shearon

Signature of Treasurer Electronically Filed by Paul Shearon Date 07 15 2009

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)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

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

Report Covering the Period: From:

M M	D D	Y Y Y Y
0 1	0 1	2 0 0 9

 To:

M M	D D	Y Y Y Y
0 6	3 0	2 0 0 9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date		
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y Y Y Y</td></tr><tr><td>2 0 0 9</td></tr></table>	Y Y Y Y	2 0 0 9		31625.40
Y Y Y Y				
2 0 0 9				
(b) Cash on Hand at Beginning of Reporting Period	31625.40			
(c) Total Receipts (from Line 19)	16968.35	16968.35		
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	48593.75	48593.75		
7. Total Disbursements (from Line 31)	18026.44	18026.44		
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	30567.31	30567.31		
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

Write or Type Committee Name

INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	9

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)	565.00	565.00
(ii) Unitemized	16403.35	16403.35
(iii) TOTAL (add Lines 11(a)(i) and (ii)	16968.35	16968.35
(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)	16968.35	16968.35
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.)	0.00	0.00
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))	16968.35	16968.35
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	16968.35	16968.35

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12750.00	12750.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	5276.44	5276.44
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))..	18026.44	18026.44
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	18026.44	18026.44

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)	16968.35	16968.35
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	16968.35	16968.35
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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 6 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Karen J Bellamy Lewis		Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 26 Bayberry Road		Transaction ID: SA11AI.8277
	City Ewing	State NJ	Zip Code 08618
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 40.00
	Name of Employer IFPTE, AFL-CIO	Occupation International Union Representative	Employee Payroll Deductions
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Ronald Bernoski		Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address N 76 W22260 Cherry Hill Road		Transaction ID: SA11AI.8313
	City Sussex	State WI	Zip Code 53089
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Social Security Administration	Occupation Administrative Law Judge	Member Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Ronald Bernoski		Date of Receipt MM / DD / YYYY 06 / 12 / 2009
	Mailing Address N 76 W22260 Cherry Hill Road		Transaction ID: SA11AI.8368
	City Sussex	State WI	Zip Code 53089
	FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 20.00
	Name of Employer Social Security Administration	Occupation Administrative Law Judge	Member Payroll Deduction
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 240.00	

SUBTOTAL of Receipts This Page (optional)	▶	80.00
TOTAL This Period (last page this line number only)	▶	

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 7 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Ronald Bernoski	Date of Receipt MM / DD / YYYY 06 / 26 / 2009
	Mailing Address N 76 W22260 Cherry Hill Road	Transaction ID: SA11AI.8421
	City State Zip Code Sussex WI 53089	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Member Payroll Deduction
Name of Employer Social Security Administration	Occupation Administrative Law Judge	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 260.00	

B.	Full Name (Last, First, Middle Initial) Matthew S Biggs	Date of Receipt MM / DD / YYYY 05 / 27 / 2009
	Mailing Address 602 N Jordan Street #401	Transaction ID: SA11AI.8278
	City State Zip Code Alexandria VA 22304	Amount of Each Receipt this Period 40.00
	FEC ID number of contributing federal political committee. C	Employee Payroll Deductions
Name of Employer IFPTE, AFL-CIO	Occupation Legislative Director	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

C.	Full Name (Last, First, Middle Initial) Cheri L Fillion	Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 1133A 10th Avenue East	Transaction ID: SA11AI.8314
	City State Zip Code Seattle WA 98102	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Member Payroll Deduction
Name of Employer Social Security Administration	Occupation Administrative Law Judge	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 220.00	

SUBTOTAL of Receipts This Page (optional)	80.00
TOTAL This Period (last page this line number only)	

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 8 / 19
(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16
			<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.

Full Name (Last, First, Middle Initial)
Cheri L Filion

Mailing Address 1133A 10th Avenue East

City State Zip Code
Seattle WA 98102

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

Name of Employer Social Security Administration
Occupation Administrative Law Judge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
240.00

Date of Receipt
MM / DD / YYYY
06 / 12 / 2009

Transaction ID: SA11AI.8369

Amount of Each Receipt this Period
20.00

Member Payroll Deduction

B.

Full Name (Last, First, Middle Initial)
Cheri L Filion

Mailing Address 1133A 10th Avenue East

City State Zip Code
Seattle WA 98102

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

Name of Employer Social Security Administration
Occupation Administrative Law Judge

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
260.00

Date of Receipt
MM / DD / YYYY
06 / 26 / 2009

Transaction ID: SA11AI.8422

Amount of Each Receipt this Period
20.00

Member Payroll Deduction

C.

Full Name (Last, First, Middle Initial)
John Garrity

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 ▼
225.00

Date of Receipt
MM / DD / YYYY
05 / 29 / 2009

Transaction ID: SA11AI.8328

Amount of Each Receipt this Period
45.00

Member Payroll Deductions

SUBTOTAL of Receipts This Page (optional)	85.00
TOTAL This Period (last page this line number only)	

**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 9 / 19
	<input checked="" 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 type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) John Garrity		Date of Receipt
	Mailing Address		<input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8417
	Name of Employer		Amount of Each Receipt this Period <input type="text" value="45.00"/>
Occupation		Member Contribution	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="270.00"/>	

B.	Full Name (Last, First, Middle Initial) Gregory J Junemann		Date of Receipt
	Mailing Address 3716 S Herman Street		<input type="text" value="05"/> / <input type="text" value="14"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8221
	Name of Employer IFPTE, AFL-CIO		Amount of Each Receipt this Period <input type="text" value="75.00"/>
Occupation International Union President		Employee Payroll Deductions	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="270.00"/>	

C.	Full Name (Last, First, Middle Initial) Gregory J Junemann		Date of Receipt
	Mailing Address 3716 S Herman Street		<input type="text" value="05"/> / <input type="text" value="27"/> / <input type="text" value="2009"/>
	City	State	Zip Code
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8281
	Name of Employer IFPTE, AFL-CIO		Amount of Each Receipt this Period <input type="text" value="60.00"/>
Occupation International Union President		Employee Payroll Deductions	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ <input type="text" value="330.00"/>	

SUBTOTAL of Receipts This Page (optional)	<input type="text" value="180.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 10 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Mark O'Hara		Date of Receipt
	Mailing Address 600 Bridlespur Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Earlsville	VA	22936
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8379
Name of Employer Social Security Administration		Occupation Administrative Law Judge	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 220.00	Member Payroll Deduction

B.	Full Name (Last, First, Middle Initial) Mark O'Hara		Date of Receipt
	Mailing Address 600 Bridlespur Lane		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Earlsville	VA	22936
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8432
Name of Employer Social Security Administration		Occupation Administrative Law Judge	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 20.00
		<input type="text"/> 240.00	Member Payroll Deduction

C.	Full Name (Last, First, Middle Initial) Paul Shearon		Date of Receipt
	Mailing Address 1211 13th Street NW #603		<input type="text"/> M <input type="text"/> M / <input type="text"/> D <input type="text"/> D / <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y <input type="text"/> Y
	City	State	Zip Code
	Washington	DC	20005
	FEC ID number of contributing federal political committee. C		Transaction ID: SA11AI.8286
Name of Employer IFPTE		Occupation Secretary-Treasurer	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼	<input type="text"/> 40.00
		<input type="text"/> 220.00	Employee Payroll Deductions

SUBTOTAL of Receipts This Page (optional)	<input type="text"/> 80.00
TOTAL This Period (last page this line number only)	<input type="text"/>

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 11 / 19
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Thomas Snook	Date of Receipt MM / DD / YYYY 05 / 28 / 2009
	Mailing Address 1454 Mendavia Avenue	Transaction ID: SA11AI.8315
	City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Member Payroll Deduction
	Name of Employer Social Security Administration Occupation Administrative Law Judge Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 220.00	

B.	Full Name (Last, First, Middle Initial) Thomas Snook	Date of Receipt MM / DD / YYYY 06 / 12 / 2009
	Mailing Address 1454 Mendavia Avenue	Transaction ID: SA11AI.8370
	City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Member Payroll Deduction
	Name of Employer Social Security Administration Occupation Administrative Law Judge Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 240.00	

C.	Full Name (Last, First, Middle Initial) Thomas Snook	Date of Receipt MM / DD / YYYY 06 / 26 / 2009
	Mailing Address 1454 Mendavia Avenue	Transaction ID: SA11AI.8423
	City State Zip Code Coral Gables FL 33146	Amount of Each Receipt this Period 20.00
	FEC ID number of contributing federal political committee. C	Member Payroll Deduction
	Name of Employer Social Security Administration Occupation Administrative Law Judge Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ 260.00	

SUBTOTAL of Receipts This Page (optional)	60.00
TOTAL This Period (last page this line number only)	565.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A. Full Name (Last, First, Middle Initial) Alan Mollohan For Congress <hr/> Mailing Address <hr/> City State Zip Code <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8475 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 3 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B. Full Name (Last, First, Middle Initial) BARBARA LEE FOR CONGRESS <hr/> Mailing Address 1736 Franklin Street #550 <hr/> City State Zip Code Oakland CA 94612 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 09 Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8469 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C. Full Name (Last, First, Middle Initial) CITIZENS FOR ARLEN SPECTER <hr/> Mailing Address 3700 MASSACHUSETTS AVE NW #108 SUITE 1100 NOR <hr/> City State Zip Code WASHINGTON DC 20016 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 00 Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.8460 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 9
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶	3000.00
TOTAL This Period (last page this line number only) ▶	(Empty box)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) CONGRESSMAN BART GORDON COMMITTEE	Transaction ID: SB23.8465 Date of Disbursement
	Mailing Address P.O. Box 2008	<input type="text" value="05"/> <input type="text" value="07"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Murfreesboro State TN Zip Code 37133	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: TN District: 06	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) DAVIS FOR CONGRESS/FRIENDS OF DAVIS	Transaction ID: SB23.8458 Date of Disbursement
	Mailing Address 5956 W. Race Avenue	<input type="text" value="02"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City Chicago State IL Zip Code 60644	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IL District: 07	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Debbie Wasserrman Schultz For Congress	Transaction ID: SB23.8471 Date of Disbursement
	Mailing Address	<input type="text" value="06"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3000.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) DONNA EDWARDS FOR CONGRESS	Transaction ID: SB23.8477 Date of Disbursement																			
	Mailing Address P.O. Box 441153	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	0	9												
	City State Zip Code FORT WASHINGTON MD 20749	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 04	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					

B.	Full Name (Last, First, Middle Initial) GIFFORDS FOR CONGRESS	Transaction ID: SB23.8473 Date of Disbursement																			
	Mailing Address PO Box 12886	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>6</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		2	3		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		2	3		2	0	0	9												
	City State Zip Code Tucson AZ 85732	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>500.00</td></tr></table>	500.00																		
500.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: AZ District: 08	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td>011</td></tr></table> Category/Type	011																		
011																					

C.	Full Name (Last, First, Middle Initial) HOYER FOR CONGRESS	Transaction ID: SB23.8467 Date of Disbursement																			
	Mailing Address 4201 Northview Dr, Ste 307	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		0	7		2	0	0	9												
	City State Zip Code Bowie MD 20716	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Contribution Candidate Name	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MD District: 05	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			
		<table border="1"><tr><td></td></tr></table> Category/Type																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3500.00</td></tr></table>	3500.00
3500.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) MURPHY, PATRICK J	Transaction ID: SB23.8462 Date of Disbursement 03 / 17 / 2009
	Mailing Address 6419 Radcliffe St.	Amount of Each Disbursement this Period 1000.00
	City Bristol State PA Zip Code 19007	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) PATRICK MURPHY FOR CONGRESS	Transaction ID: SB23.8479 Date of Disbursement 06 / 24 / 2009
	Mailing Address PO BOX 868	Amount of Each Disbursement this Period 1000.00
	City LEVITTOWN State PA Zip Code 19058	
	Purpose of Disbursement Contribution Candidate Name	011 Category/Type
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 08	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) PEOPLE FOR PATTY MURRAY U S SENATE CAMPAIGN	Transaction ID: SB23.8463 Date of Disbursement 03 / 30 / 2009
	Mailing Address PO BOX 3662	Amount of Each Disbursement this Period 1250.00
	City SEATTLE State WA Zip Code 98124	
	Purpose of Disbursement Contribution Candidate Name Golden Tennis Shoe Awards Luncheon	011 Category/Type
	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: WA District: 00	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

3250.00

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

12750.00

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)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A. Full Name (Last, First, Middle Initial) Albano, Milam For Assembly	Transaction ID: SB29.8485	
	Date of Disbursement MM / DD / YYYY 03 / 17 / 2009	
	Amount of Each Disbursement this Period 500.00	
	Mailing Address Box 941 City Cape May Courthous State NJ Zip Code 08210 Purpose of Disbursement New Jersey State Assembly Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

B. Full Name (Last, First, Middle Initial) Albano For Assembly	Transaction ID: SB29.8491	
	Date of Disbursement MM / DD / YYYY 03 / 31 / 2009	
	Amount of Each Disbursement this Period 1000.00	
	Mailing Address PO Box 941 City Cape May Courthous State NJ Zip Code 08210 Purpose of Disbursement New Jersey State Assembly Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

C. Full Name (Last, First, Middle Initial) Chris Christie For Governor	Transaction ID: SB29.8489	
	Date of Disbursement MM / DD / YYYY 03 / 17 / 2009	
	Amount of Each Disbursement this Period 1000.00	
	Mailing Address 1719 Route 10 Suite 126 City Parsippany State NJ Zip Code 07054 Purpose of Disbursement New Jersey Governor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

SUBTOTAL of Disbursements This Page (optional)	2500.00
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)

INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Committee For Evans For Assembly <hr/> Mailing Address 45 Essex Street Suite 108 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name 011 Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8483 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Committee For Evans For Assembly <hr/> Mailing Address 45 Essex Street Suite 108 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8493 Date of Disbursement 05 / 14 / 2009 <hr/> Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) Committee To Elect Sheila Oliver <hr/> Mailing Address 45 Essex Street Suite 108 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8487 Date of Disbursement 03 / 17 / 2009 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1050.00

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 18 / 19

<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)

INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Committee To Elect Sheila Oliver <hr/> Mailing Address 45 Essex Street Suite 108 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8494 Date of Disbursement 05 / 29 / 2009 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) Friends of Connie Wagnor <hr/> Mailing Address 45 Essex Street Suite 108 <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8495 Date of Disbursement 05 / 29 / 2009 <hr/> Amount of Each Disbursement this Period 250.00
C.	Full Name (Last, First, Middle Initial) Greenstein for Assembly <hr/> Mailing Address PO Box 492 <hr/> City Palmsboro State NJ Zip Code 08536 <hr/> Purpose of Disbursement New Jersey State Assembly Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8480 Date of Disbursement 03 / 10 / 2009 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1250.00

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 19 / 19

<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)
INT'L FED. OF PROFESSIONAL AND TECHNICAL ENGINEERS LEG. EDU. ACTION PROGRAM - PAC

A.	Full Name (Last, First, Middle Initial) Pay Pal		Transaction ID: SB29.8497	
	Mailing Address 4100 Solutions Center #774100		Date of Disbursement MM / DD / YYYY 06 / 30 / 2009	
City Chicago		State IL	Zip Code 60677-4001	
Purpose of Disbursement Merchant Account Fees		Candidate Name		Amount of Each Disbursement this Period 217.78
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) ▼		Category/ Type
State: District:				

B.	Full Name (Last, First, Middle Initial) PNC Bank		Transaction ID: SB29.8498	
	Mailing Address PO Box 609		Date of Disbursement MM / DD / YYYY 06 / 30 / 2009	
City Pittsburgh		State PA	Zip Code 15230-9738	
Purpose of Disbursement Merchant Account Fees		Candidate Name		Amount of Each Disbursement this Period 258.66
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) ▼		Category/ Type
State: District:		001		

SUBTOTAL of Disbursements This Page (optional)	▶	476.44
TOTAL This Period (last page this line number only)	▶	5276.44