

# 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  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

ADDRESS (number and street) 2556 SENECA AVENUE  
 Check if different than previously reported. (ACC)  
NIAGARA FALLS NY 14305

2. **FEC IDENTIFICATION NUMBER** C00155069  
**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 07 01 2008 through 09 30 2008

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 Mr. ENRICO LIBERALE

Signature of Treasurer Electronically Filed by Mr. ENRICO LIBERALE Date 10 08 2008

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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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		158964.71
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	175067.27									
(c) Total Receipts (from Line 19) .....	14117.25	31869.81								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	189184.52	190834.52								
7. Total Disbursements (from Line 31) .....	9412.28	11062.28								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	179772.24	179772.24								
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**

Write or Type Committee Name  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
0	9

D	D
3	0

Y	Y	Y	Y
2	0	0	8

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	1902.50	2112.00
(i) Itemized (use Schedule A) .....		
(ii) Unitemized .....	12214.75	29757.81
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	14117.25	31869.81
(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) .....	14117.25	31869.81
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)) .....	14117.25	31869.81
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	14117.25	31869.81

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	0.00	0.00
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.....	9412.28	11062.28
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))..	9412.28	11062.28
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	9412.28	11062.28

**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) .....	14117.25	31869.81
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	14117.25	31869.81
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 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) CARMELO AMATO JR		Date of Receipt	
	Mailing Address 3330 MCKINLEY PKWY		M M / D D / Y Y Y Y 09 / 15 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.6601
	BLASDELL	NY	14219	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		45.16	
Name of Employer OAKGROVE CONSTRUCTION INC		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 209.45		

<b>B.</b>	Full Name (Last, First, Middle Initial) ROY ARIST		Date of Receipt	
	Mailing Address 8030 CHERRY LANE		M M / D D / Y Y Y Y 09 / 17 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.6716
	NIAGARA FALLS	NY	14304	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		32.63	
Name of Employer RIVERA ENTERPRISES OF NIAGARA, INC.		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 232.33		

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL BYKOWSKI		Date of Receipt	
	Mailing Address 10861 GRISWOLD RD		M M / D D / Y Y Y Y 07 / 18 / 2008	
	City	State	Zip Code	<b>Transaction ID:</b> SA11AI.5967
	DARIEN	NY	14040	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee. <b>C</b>		26.25	
Name of Employer CERRONE MARK V INC		Occupation LABORER		
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 202.76		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>104.04</b>
<b>TOTAL</b> 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 7 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) MICHAEL BYKOWSKI</p> <p>Mailing Address 10861 GRISWOLD RD</p> <p>City State Zip Code <b>DARIEN NY 14040</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CERRONE MARK V INC LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">233.58</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">08 / 25 / 2008</span></p> <p><b>Transaction ID: SA11AI.6425</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">30.82</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) MICHAEL BYKOWSKI</p> <p>Mailing Address 10861 GRISWOLD RD</p> <p>City State Zip Code <b>DARIEN NY 14040</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CERRONE MARK V INC LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">258.82</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID: SA11AI.6758</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">25.24</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) MARK CASE</p> <p>Mailing Address 8565 BUNKER HILL RD</p> <p>City State Zip Code <b>GASPORT NY 14067</b></p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer Occupation CASE BORING CORP LABORER</p> <p>Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼ <span style="border: 1px solid black; padding: 2px;">213.60</span></p>	<p>Date of Receipt <span style="border: 1px solid black; padding: 2px;">07 / 16 / 2008</span></p> <p><b>Transaction ID: SA11AI.5919</b></p> <p>Amount of Each Receipt this Period <span style="border: 1px solid black; padding: 2px;">41.10</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">97.16</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

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

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

FOR LINE NUMBER: PAGE 8 / 31

(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
MARK CASE

Mailing Address 8565 BUNKER HILL RD

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
CASE BORING CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 264.30

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	6		2	0	0	8

Transaction ID: SA11AI.5920

Amount of Each Receipt this Period

50.70
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**B.**

Full Name (Last, First, Middle Initial)  
MARK CASE

Mailing Address 8565 BUNKER HILL RD

City State Zip Code  
GASPORT NY 14067

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

Name of Employer Occupation  
CASE BORING CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 316.35

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	8		1	9		2	0	0	8

Transaction ID: SA11AI.6356

Amount of Each Receipt this Period

52.05
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**C.**

Full Name (Last, First, Middle Initial)  
J VINCENT CERRONE

Mailing Address 945 LOWER RIVER RD

City State Zip Code  
YOUNGSTOWN NY 14174

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 205.07

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	7		1	8		2	0	0	8

Transaction ID: SA11AI.5968

Amount of Each Receipt this Period

24.00
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**SUBTOTAL** of Receipts This Page (optional) ..... ▶

126.75
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**TOTAL** This Period (last page this line number only) ..... ▶

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# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) J VINCENT CERRONE</p> <p>Mailing Address 945 LOWER RIVER RD</p> <p>City State Zip Code YOUNGSTOWN NY 14174</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer CERRONE MARK V INC</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">235.07</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 25 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.6426</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">30.00</span></p>
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<p><b>B.</b> Full Name (Last, First, Middle Initial) J VINCENT CERRONE</p> <p>Mailing Address 945 LOWER RIVER RD</p> <p>City State Zip Code YOUNGSTOWN NY 14174</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer CERRONE MARK V INC</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">255.47</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">09 / 19 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.6759</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">20.40</span></p>
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<p><b>C.</b> Full Name (Last, First, Middle Initial) RICHARD A. CHRISTOPHER</p> <p>Mailing Address 16 LINCOLN BOULEVARD</p> <p>City State Zip Code KENMORE NY 14217</p> <p>FEC ID number of contributing federal political committee. <span style="border: 1px solid black; padding: 2px;">C</span></p> <p>Name of Employer CIMINELLI LP CONST CORP</p> <p>Occupation LABORER</p> <p>Receipt For:  <input type="checkbox"/> Primary   <input type="checkbox"/> General  <input type="checkbox"/> Other (specify) ▼</p> <p>Aggregate Year-to-Date ▼  <span style="border: 1px solid black; padding: 2px;">212.63</span></p>	<p>Date of Receipt  <span style="border: 1px solid black; padding: 2px;">08 / 08 / 2008</span></p> <p><b>Transaction ID:</b> SA11AI.6123</p> <p>Amount of Each Receipt this Period  <span style="border: 1px solid black; padding: 2px;">22.50</span></p>
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<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<span style="border: 1px solid black; padding: 2px;">72.90</span>
<b>TOTAL</b> This Period (last page this line number only) .....	<span style="border: 1px solid black; padding: 2px;"> </span>

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 31

(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
RICHARD A. CHRISTOPHER

Mailing Address 16 LINCOLN BOULEVARD

City State Zip Code  
KENMORE NY 14217

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

Name of Employer Occupation  
CIMINELLI LP CONST CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 242.33

Date of Receipt

M M / D D / Y Y Y Y  
09 / 08 / 2008

Transaction ID: SA11AI.6539

Amount of Each Receipt this Period  
29.70

**B.**

Full Name (Last, First, Middle Initial)  
A ROBERT CONNOLLY

Mailing Address 1289 - 95TH ST

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
LABORER'S LOCAL #91 LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 210.00

Date of Receipt

M M / D D / Y Y Y Y  
08 / 29 / 2008

Transaction ID: SA11AI.6467

Amount of Each Receipt this Period  
30.00

**C.**

Full Name (Last, First, Middle Initial)  
A ROBERT CONNOLLY

Mailing Address 1289 - 95TH ST

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
LABORER'S LOCAL #91 LABORER

Receipt For:  Primary  General  Other (specify) ▼  
Aggregate Year-to-Date ▼ 234.00

Date of Receipt

M M / D D / Y Y Y Y  
09 / 15 / 2008

Transaction ID: SA11AI.6598

Amount of Each Receipt this Period  
24.00

**SUBTOTAL** of Receipts This Page (optional) ..... ▶

83.70

**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 11 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 215.67

Date of Receipt  
MM / DD / YYYY  
07 / 10 / 2008

Transaction ID: SA11AI.5855

Amount of Each Receipt this Period  
28.73

**B.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.68

Date of Receipt  
MM / DD / YYYY  
08 / 13 / 2008

Transaction ID: SA11AI.6164

Amount of Each Receipt this Period  
40.01

**C.**

Full Name (Last, First, Middle Initial)  
DANIEL DAL PORTO

Mailing Address 8040 CRESTVIEW DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
SEVENSON ENVIRONMENTAL SVC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 274.73

Date of Receipt  
MM / DD / YYYY  
09 / 12 / 2008

Transaction ID: SA11AI.6575

Amount of Each Receipt this Period  
19.05

**SUBTOTAL** of Receipts This Page (optional) ..... ► **87.79**

**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 12 / 31  
(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"/>		<input type="checkbox"/>		<input type="checkbox"/>		<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
M TODD DOTY

Mailing Address 3175 SOUTH CREEK RD

City State Zip Code  
HAMBURG NY 14075

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

Name of Employer Occupation  
TUG HILL CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 276.93

Date of Receipt  
M M / D D / Y Y Y Y  
07 / 18 / 2008

Transaction ID: SA11AI.5988

Amount of Each Receipt this Period  
36.04

**B.**

Full Name (Last, First, Middle Initial)  
M TODD DOTY

Mailing Address 3175 SOUTH CREEK RD

City State Zip Code  
HAMBURG NY 14075

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

Name of Employer Occupation  
TUG HILL CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 318.86

Date of Receipt  
M M / D D / Y Y Y Y  
08 / 11 / 2008

Transaction ID: SA11AI.6148

Amount of Each Receipt this Period  
41.93

**C.**

Full Name (Last, First, Middle Initial)  
M TODD DOTY

Mailing Address 3175 SOUTH CREEK RD

City State Zip Code  
HAMBURG NY 14075

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

Name of Employer Occupation  
TUG HILL CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 354.67

Date of Receipt  
M M / D D / Y Y Y Y  
09 / 12 / 2008

Transaction ID: SA11AI.6581

Amount of Each Receipt this Period  
35.81

**SUBTOTAL** of Receipts This Page (optional) ..... ► **113.78**

**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 13 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 223.54

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008

Transaction ID: SA11AI.5970

Amount of Each Receipt this Period  
26.25

**B.**

Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 255.34

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2008

Transaction ID: SA11AI.6428

Amount of Each Receipt this Period  
31.80

**C.**

Full Name (Last, First, Middle Initial)  
P DANNY, SR. DUNN

Mailing Address 105 LAKEWOOD VILLAGE

City State Zip Code  
MEDINA NY 14103

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 279.67

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

Transaction ID: SA11AI.6761

Amount of Each Receipt this Period  
24.33

**SUBTOTAL** of Receipts This Page (optional) ..... ► **82.38**

**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 14 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) EUGENE FUCARINO II	Date of Receipt
	Mailing Address 7031 JOANNE CIR	<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 08 / 25 / 2008
	City State Zip Code NIAGARA FALLS NY 14304	<b>Transaction ID:</b> SA11AI.6429
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 30.00
	Name of Employer ANASTASI TRUCKING & PAVING Occupation LABORER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 222.29	

<b>B.</b>	Full Name (Last, First, Middle Initial) EUGENE FUCARINO II	Date of Receipt
	Mailing Address 7031 JOANNE CIR	<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 09 / 19 / 2008
	City State Zip Code NIAGARA FALLS NY 14304	<b>Transaction ID:</b> SA11AI.6762
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 21.33
	Name of Employer ANASTASI TRUCKING & PAVING Occupation LABORER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 243.62	

<b>C.</b>	Full Name (Last, First, Middle Initial) M WILLIAM GRACE	Date of Receipt
	Mailing Address 1323 - 104TH ST	<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 08 / 04 / 2008
	City State Zip Code NIAGARA FALLS NY 14304	<b>Transaction ID:</b> SA11AI.6113
	FEC ID number of contributing federal political committee. <input type="text"/> C <input type="text"/>	Amount of Each Receipt this Period <input type="text"/> 30.00
	Name of Employer L.L.#91 WELFARE FUND Occupation LABORER Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ Aggregate Year-to-Date ▼ <input type="text"/> 210.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text"/> 81.33
<b>TOTAL</b> 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 15 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) M WILLIAM GRACE		Date of Receipt																					
	Mailing Address 1323 - 104TH ST		<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>9</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	9		0	3		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	9		0	3		2	0	0	8														
	City State Zip Code NIAGARA FALLS NY 14304		<b>Transaction ID:</b> SA11AI.6536																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 24.00																						
Name of Employer L.L.#91 WELFARE FUND		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 234.00																						

<b>B.</b>	Full Name (Last, First, Middle Initial) R GORDON HASELEY JR		Date of Receipt																					
	Mailing Address 6667 DALE RD		<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>7</td><td></td><td>1</td><td>8</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	7		1	8		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	7		1	8		2	0	0	8														
	City State Zip Code NEWFANE NY 14108		<b>Transaction ID:</b> SA11AI.5990																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 31.99																						
Name of Employer TUG HILL CONSTRUCTION, IN-C.		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 233.53																						

<b>C.</b>	Full Name (Last, First, Middle Initial) R GORDON HASELEY JR		Date of Receipt																					
	Mailing Address 6667 DALE RD		<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>8</td><td></td><td>1</td><td>1</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	8		1	1		2	0	0	8
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	8		1	1		2	0	0	8														
	City State Zip Code NEWFANE NY 14108		<b>Transaction ID:</b> SA11AI.6150																					
FEC ID number of contributing federal political committee. <b>C</b>		Amount of Each Receipt this Period 36.56																						
Name of Employer TUG HILL CONSTRUCTION, IN-C.		Occupation LABORER																						
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		Aggregate Year-to-Date ▼ 270.09																						

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	92.55
<b>TOTAL</b> 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 16 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
R GORDON HASELEY JR  
 Mailing Address 6667 DALE RD  
 City NEWFANE State NY Zip Code 14108  
 Date of Receipt 09 / 12 / 2008  
 Transaction ID: SA11AI.6583  
 Amount of Each Receipt this Period 34.43  
 FEC ID number of contributing federal political committee. C  
 Name of Employer TUG HILL CONSTRUCTION, INC.  
 Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 304.52

**B.** Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY  
 Mailing Address 8195 REMSEN RD  
 City AKRON State NY Zip Code 14001  
 Date of Receipt 07 / 15 / 2008  
 Transaction ID: SA11AI.5884  
 Amount of Each Receipt this Period 29.85  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ALDRIDGE ELECTRIC INC  
 Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 231.35

**C.** Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY  
 Mailing Address 8195 REMSEN RD  
 City AKRON State NY Zip Code 14001  
 Date of Receipt 08 / 15 / 2008  
 Transaction ID: SA11AI.6193  
 Amount of Each Receipt this Period 29.85  
 FEC ID number of contributing federal political committee. C  
 Name of Employer ALDRIDGE ELECTRIC INC  
 Occupation LABORER  
 Receipt For:  Primary  General  Other (specify) ▼  
 Aggregate Year-to-Date 261.20

**SUBTOTAL** of Receipts This Page (optional) ..... ► 94.13  
**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 17 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
MICHAEL HENLEY

Mailing Address 8195 REMSEN RD

City AKRON State NY Zip Code 14001

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

Name of Employer ALDRIDGE ELECTRIC INC Occupation LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 298.51

Date of Receipt: 09 / 15 / 2008  
**Transaction ID:** SA11AI.6586  
 Amount of Each Receipt this Period: 37.31

**B.**

Full Name (Last, First, Middle Initial)  
E ROBERT HORNE JR

Mailing Address 7406 PACKARD RD

City NIAGARA FALLS State NY Zip Code 14304

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

Name of Employer OAKGROVE CONSTRUCTION INC Occupation LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 204.45

Date of Receipt: 09 / 15 / 2008  
**Transaction ID:** SA11AI.6608  
 Amount of Each Receipt this Period: 42.19

**C.**

Full Name (Last, First, Middle Initial)  
A PAUL HOYT

Mailing Address 1397 CARAVELLE DR

City NIAGARA FALLS State NY Zip Code 14304

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

Name of Employer CERRONE MARK V INC Occupation LABORER

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 225.22

Date of Receipt: 07 / 18 / 2008  
**Transaction ID:** SA11AI.5974  
 Amount of Each Receipt this Period: 25.24

**SUBTOTAL** of Receipts This Page (optional) ..... ► **104.74**

**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 18 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial)  
A PAUL HOYT

Mailing Address 1397 CARAVELLE DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 257.44

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2008

**Transaction ID:** SA11AI.6430

Amount of Each Receipt this Period  
32.22

**B.**

Full Name (Last, First, Middle Initial)  
A PAUL HOYT

Mailing Address 1397 CARAVELLE DR

City State Zip Code  
NIAGARA FALLS NY 14304

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 286.40

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** SA11AI.6763

Amount of Each Receipt this Period  
28.96

**C.**

Full Name (Last, First, Middle Initial)  
E TODD KLUMPP

Mailing Address 6540 DRAKE SETTLEMENT RD

City State Zip Code  
APPLETON NY 14008

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

Name of Employer Occupation  
TUG HILL CONSTRUCTION, IN-C. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 218.29

Date of Receipt  
MM / DD / YYYY  
07 / 18 / 2008

**Transaction ID:** SA11AI.5991

Amount of Each Receipt this Period  
31.43

**SUBTOTAL** of Receipts This Page (optional) ..... ► 92.61

**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 19 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) E TODD KLUMPP		Date of Receipt MM / DD / YYYY 08 / 11 / 2008		
	Mailing Address 6540 DRAKE SETTLEMENT RD		<b>Transaction ID:</b> SA11AI.6151		
	City APPLETON	State NY	Zip Code 14008	Amount of Each Receipt this Period 36.45	
	FEC ID number of contributing federal political committee. C				
	Name of Employer TUG HILL CONSTRUCTION, IN-C. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation LABORER Aggregate Year-to-Date ▼ 254.74			

<b>B.</b>	Full Name (Last, First, Middle Initial) E TODD KLUMPP		Date of Receipt MM / DD / YYYY 09 / 12 / 2008		
	Mailing Address 6540 DRAKE SETTLEMENT RD		<b>Transaction ID:</b> SA11AI.6584		
	City APPLETON	State NY	Zip Code 14008	Amount of Each Receipt this Period 31.80	
	FEC ID number of contributing federal political committee. C				
	Name of Employer TUG HILL CONSTRUCTION, IN-C. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation LABORER Aggregate Year-to-Date ▼ 286.54			

<b>C.</b>	Full Name (Last, First, Middle Initial) E TODD KLUMPP		Date of Receipt MM / DD / YYYY 09 / 12 / 2008		
	Mailing Address 6540 DRAKE SETTLEMENT RD		<b>Transaction ID:</b> SA11AI.6585		
	City APPLETON	State NY	Zip Code 14008	Amount of Each Receipt this Period 0.60	
	FEC ID number of contributing federal political committee. C				
	Name of Employer TUG HILL CONSTRUCTION, IN-C. Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Occupation LABORER Aggregate Year-to-Date ▼ 287.14			

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	68.85
<b>TOTAL</b> 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 20 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) JOHN LUCIDO		Date of Receipt MM / DD / YYYY 09 / 03 / 2008		
	Mailing Address 4010 CLIFF ST		<b>Transaction ID:</b> SA11AI.6535		
	City NIAGARA FALLS	State NY	Zip Code 14305	Amount of Each Receipt this Period 4.35	
	FEC ID number of contributing federal political committee. C				
	Name of Employer JOHNSON, WALTER S. BLDG. CO.	Occupation LABORER	Aggregate Year-to-Date 200.34		

<b>B.</b>	Full Name (Last, First, Middle Initial) P MICHAEL MC CABE		Date of Receipt MM / DD / YYYY 08 / 28 / 2008		
	Mailing Address 4371 MACK AVENUE		<b>Transaction ID:</b> SA11AI.6463		
	City GASPORT	State NY	Zip Code 14067	Amount of Each Receipt this Period 32.81	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BABCOCK UTILITIES, INC.	Occupation LABORER	Aggregate Year-to-Date 225.54		

<b>C.</b>	Full Name (Last, First, Middle Initial) P MICHAEL MC CABE		Date of Receipt MM / DD / YYYY 09 / 22 / 2008		
	Mailing Address 4371 MACK AVENUE		<b>Transaction ID:</b> SA11AI.6785		
	City GASPORT	State NY	Zip Code 14067	Amount of Each Receipt this Period 26.60	
	FEC ID number of contributing federal political committee. C				
	Name of Employer BABCOCK UTILITIES, INC.	Occupation LABORER	Aggregate Year-to-Date 252.14		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>63.76</b>
<b>TOTAL</b> 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 21 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) MARSHALL OLDHAM	Date of Receipt MM / DD / YYYY 07 / 18 / 2008
	Mailing Address 238 79TH STREET	<b>Transaction ID:</b> SA11AI.5977
	City State Zip Code NIAGARA FALLS NY 14304	Amount of Each Receipt this Period 25.80
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CERRONE MARK V INC LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 212.95	

<b>B.</b>	Full Name (Last, First, Middle Initial) MARSHALL OLDHAM	Date of Receipt MM / DD / YYYY 08 / 25 / 2008
	Mailing Address 238 79TH STREET	<b>Transaction ID:</b> SA11AI.6431
	City State Zip Code NIAGARA FALLS NY 14304	Amount of Each Receipt this Period 34.66
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CERRONE MARK V INC LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 247.61	

<b>C.</b>	Full Name (Last, First, Middle Initial) MARSHALL OLDHAM	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 238 79TH STREET	<b>Transaction ID:</b> SA11AI.6764
	City State Zip Code NIAGARA FALLS NY 14304	Amount of Each Receipt this Period 23.13
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CERRONE MARK V INC LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 270.74	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	83.59
<b>TOTAL</b> 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 22 / 31
	<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<b>A.</b>	Full Name (Last, First, Middle Initial) P MICHAEL ORSI	Date of Receipt MM / DD / YYYY 09 / 19 / 2008
	Mailing Address 69 MASON DR	<b>Transaction ID:</b> SA11AI.6765
	City State Zip Code NIAGARA FALLS NY 14304	Amount of Each Receipt this Period 27.72
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation CERRONE MARK V INC LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 204.26	

<b>B.</b>	Full Name (Last, First, Middle Initial) MICHAEL PALLADINO	Date of Receipt MM / DD / YYYY 08 / 29 / 2008
	Mailing Address 7154 ELLICOTT RD	<b>Transaction ID:</b> SA11AI.6469
	City State Zip Code LOCKPORT NY 14094	Amount of Each Receipt this Period 30.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LABORER'S LOCAL #91 LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

<b>C.</b>	Full Name (Last, First, Middle Initial) MICHAEL PALLADINO	Date of Receipt MM / DD / YYYY 09 / 15 / 2008
	Mailing Address 7154 ELLICOTT RD	<b>Transaction ID:</b> SA11AI.6600
	City State Zip Code LOCKPORT NY 14094	Amount of Each Receipt this Period 24.00
	FEC ID number of contributing federal political committee. C	
	Name of Employer Occupation LABORER'S LOCAL #91 LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 234.00	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	81.72
<b>TOTAL</b> 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 23 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.**

Full Name (Last, First, Middle Initial) RICHARD PALLADINO		Date of Receipt MM / DD / YYYY 09 / 02 / 2008
Mailing Address 7657 HIGHLAND DR		<b>Transaction ID:</b> SA11AI.6486
City GASPORT	State NY	Zip Code 14067
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 24.00
Name of Employer L.L.#91 EDUCATIONAL & TRAIN.FUND	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 210.00	

**B.**

Full Name (Last, First, Middle Initial) CHRIS PRIMS		Date of Receipt MM / DD / YYYY 08 / 18 / 2008
Mailing Address 61 CORONET DR		<b>Transaction ID:</b> SA11AI.6276
City TONAWANDA	State NY	Zip Code 14150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 38.81
Name of Employer A.A.C. CONTRACTING INC	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 222.73	

**C.**

Full Name (Last, First, Middle Initial) CHRIS PRIMS		Date of Receipt MM / DD / YYYY 09 / 17 / 2008
Mailing Address 61 CORONET DR		<b>Transaction ID:</b> SA11AI.6692
City TONAWANDA	State NY	Zip Code 14150
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 1.20
Name of Employer A.A.C. CONTRACTING INC	Occupation LABORER	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 223.93	

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	64.01
<b>TOTAL</b> 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 24 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
CHRIS PRIMS

Mailing Address 61 CORONET DR

City State Zip Code  
TONAWANDA NY 14150

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

Name of Employer Occupation  
A.A.C. CONTRACTING INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 241.71

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** SA11AI.6776

Amount of Each Receipt this Period  
17.78

**B.** Full Name (Last, First, Middle Initial)  
DONALD RALPH

Mailing Address 10795 LAKESHORE RD

City State Zip Code  
LYNDONVILLE NY 14098

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

Name of Employer Occupation  
BABCOCK UTILITIES, INC. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 214.18

Date of Receipt  
MM / DD / YYYY  
09 / 22 / 2008

**Transaction ID:** SA11AI.6786

Amount of Each Receipt this Period  
27.27

**C.** Full Name (Last, First, Middle Initial)  
LAWRENCE ROBINSON III

Mailing Address 6019 GRAUER RD

City State Zip Code  
NIAGARA FALLS NY 14305

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. CO. LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.16

Date of Receipt  
MM / DD / YYYY  
09 / 18 / 2008

**Transaction ID:** SA11AI.6755

Amount of Each Receipt this Period  
18.45

**SUBTOTAL** of Receipts This Page (optional) ..... ► **63.50**

**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 25 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY N

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
CIMINELLI LP CONST CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 212.15

Date of Receipt  
MM / DD / YYYY  
07 / 03 / 2008

**Transaction ID:** SA11AI.5829

Amount of Each Receipt this Period  
29.18

**B.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY N

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
CIMINELLI LP CONST CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 236.38

Date of Receipt  
MM / DD / YYYY  
08 / 08 / 2008

**Transaction ID:** SA11AI.6125

Amount of Each Receipt this Period  
24.23

**C.** Full Name (Last, First, Middle Initial)  
THOMAS SANSONE

Mailing Address 6613 ROYAL PKWY N

City State Zip Code  
LOCKPORT NY 14094

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

Name of Employer Occupation  
CIMINELLI LP CONST CORP LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 265.63

Date of Receipt  
MM / DD / YYYY  
09 / 08 / 2008

**Transaction ID:** SA11AI.6542

Amount of Each Receipt this Period  
29.25

**SUBTOTAL** of Receipts This Page (optional) ..... ► 82.66

**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 26 / 31  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
M ROBERT SCALZO

Mailing Address 5792 BUFFALO ST

City State Zip Code  
SANBORN NY 14132

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

Name of Employer Occupation  
JOHNSON, WALTER S. BLDG. LABORER  
CO.

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 210.46

Date of Receipt  
M M / D D / Y Y Y Y Y  
09 / 18 / 2008

**Transaction ID:** SA11AI.6756

Amount of Each Receipt this Period  
23.36

**B.** Full Name (Last, First, Middle Initial)  
Mr. Ethan A. Stein

Mailing Address 5885 MILLER RD

City State Zip Code  
Niagara Falls NY 14304

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 279.60

Date of Receipt  
M M / D D / Y Y Y Y Y  
07 / 18 / 2008

**Transaction ID:** SA11AI.5980

Amount of Each Receipt this Period  
24.79

**C.** Full Name (Last, First, Middle Initial)  
Mr. Ethan A. Stein

Mailing Address 5885 MILLER RD

City State Zip Code  
Niagara Falls NY 14304

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼ 310.62

Date of Receipt  
M M / D D / Y Y Y Y Y  
08 / 25 / 2008

**Transaction ID:** SA11AI.6434

Amount of Each Receipt this Period  
31.02

**SUBTOTAL** of Receipts This Page (optional) ..... ► 79.17

**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 27 / 31  
(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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

**A.** Full Name (Last, First, Middle Initial)  
Mr. Ethan A. Stein

Mailing Address 5885 MILLER RD

City State Zip Code  
Niagara Falls NY 14304

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

Name of Employer Occupation  
CERRONE MARK V INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 334.62

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** SA11AI.6767

Amount of Each Receipt this Period  
24.00

**B.** Full Name (Last, First, Middle Initial)  
BRUCE STENZEL

Mailing Address 1098 UPPER MOUNTAIN RD

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
MADER CONSTRUCTION CO INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 216.02

Date of Receipt  
MM / DD / YYYY  
08 / 25 / 2008

**Transaction ID:** SA11AI.6441

Amount of Each Receipt this Period  
24.23

**C.** Full Name (Last, First, Middle Initial)  
BRUCE STENZEL

Mailing Address 1098 UPPER MOUNTAIN RD

City State Zip Code  
LEWISTON NY 14092

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

Name of Employer Occupation  
MADER CONSTRUCTION CO INC LABORER

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 249.17

Date of Receipt  
MM / DD / YYYY  
09 / 19 / 2008

**Transaction ID:** SA11AI.6781

Amount of Each Receipt this Period  
33.15

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>81.38</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>1902.50</b>

**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 28 / 31

<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) CATARACT PRINTING</p> <p>Mailing Address 4037 LEWISTON ROAD</p> <p>City NIAGARA FALLS State NY Zip Code 14305</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6847 <b>Date of Disbursement</b> 07 / 31 / 2008</p> <p>Amount of Each Disbursement this Period 78.84</p> <p>001 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) CITIZENS FOR SAM HOYT</p> <p>Mailing Address P.O. BOX 855</p> <p>City BUFFALO State NY Zip Code 14205</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6849 <b>Date of Disbursement</b> 08 / 25 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT CHARLES PITARESSI</p> <p>Mailing Address P.O. BOX 584</p> <p>City NIAGARA FALLS State NY Zip Code 14305</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6851 <b>Date of Disbursement</b> 08 / 15 / 2008</p> <p>Amount of Each Disbursement this Period 500.00</p> <p>011 Category/ Type</p>

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

2078.84

**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 29 / 31

<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ERNEST C. PALMER</p> <p>Mailing Address 4335 LOWER RIVER ROAD</p> <p>City YOUNGSTOWN State NY Zip Code 14174</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6845 <b>Date of Disbursement</b> 07 / 11 / 2008</p> <p>Amount of Each Disbursement this Period 400.00</p> <p>011 Category/ Type</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ERNEST C. PALMER</p> <p>Mailing Address 4335 LOWER RIVER ROAD</p> <p>City YOUNGSTOWN State NY Zip Code 14174</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6860 <b>Date of Disbursement</b> 09 / 29 / 2008</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>011 Category/ Type</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT PAULA BANKS DAHLKE</p> <p>Mailing Address P.O. BOX 4013</p> <p>City NIAGARA FALLS State NY Zip Code 14304</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB29.6861 <b>Date of Disbursement</b> 09 / 18 / 2008</p> <p>Amount of Each Disbursement this Period 1500.00</p> <p>011 Category/ Type</p>

**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)

PAGE 30 / 31

<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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

<p><b>A.</b> Full Name (Last, First, Middle Initial) FRIENDS OF JOE MESI</p> <p>Mailing Address P.O. BOX 239</p> <p>City GETZVILLE State NY Zip Code 14068</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6858</p> <p>Date of Disbursement 09 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 100.00</p>
<p><b>B.</b> Full Name (Last, First, Middle Initial) Grisanti for Senate</p> <p>Mailing Address 21 Duluth Avenue</p> <p>City Buffalo State NY Zip Code 14216</p> <p>Purpose of Disbursement <input type="checkbox"/> 011 Category/Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6853</p> <p>Date of Disbursement 08 / 05 / 2008</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p><b>C.</b> Full Name (Last, First, Middle Initial) JOHN FROSLONE, CPA</p> <p>Mailing Address P.O. BOX 3113</p> <p>City NIAGARA FALLS State NY Zip Code 14304</p> <p>Purpose of Disbursement <input type="checkbox"/> 001 Category/Type</p> <p>Candidate Name</p> <p>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) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.6841</p> <p>Date of Disbursement 07 / 12 / 2008</p> <p>Amount of Each Disbursement this Period 1150.00</p>

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

2250.00

**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)  
LABORERS LOCAL NO. 91 POLITICAL ACTION FUND

A.

Full Name (Last, First, Middle Initial)  
LABORERS LOCAL 91

Transaction ID: SB29.6863  
Date of Disbursement

Mailing Address 2556 SENECA AVE.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		2	9		2	0	0	8

City State Zip Code  
NIAGARA FALLS NY 14305

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

58.44
-------

Candidate Name

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

B.

Full Name (Last, First, Middle Initial)  
MAZIARZ STATE SENATE

Transaction ID: SB29.6854  
Date of Disbursement

Mailing Address P.O. BOX 220

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	8

City State Zip Code  
NIAGARA FALLS NY 14304

Amount of Each Disbursement this Period

Purpose of Disbursement

011
Category/ Type

2500.00
---------

Candidate Name

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

C.

Full Name (Last, First, Middle Initial)  
NIAGARA COUNTY BOARD OF ELECTIONS

Transaction ID: SB29.6856  
Date of Disbursement

Mailing Address 111 MAIN STREET

M	M	/	D	D	/	Y	Y	Y	Y
0	8		0	5		2	0	0	8

City State Zip Code  
LOCKPORT NY 14094

Amount of Each Disbursement this Period

Purpose of Disbursement

001
Category/ Type

25.00
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Candidate Name

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

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

2583.44
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TOTAL This Period (last page this line number only) .....

9412.28
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