

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) IUOE OPERATING ENGINEERS

USE FEC MAILING LABEL OR TYPE OR PRINT

Example: If typing, type over the lines

ADDRESS (number and street) 1375 VIRGINIA DR. FT. WASHINGTON PA 19034

Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00136739 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year Report, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Convention, Special, Runoff. (d) 30-Day Post-Election Report for the: General, Runoff, Special.

5. Covering Period 07 01 2009 through 09 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 JAMES JAMES JONES

Signature of Treasurer Electronically Filed by JAMES JAMES JONES Date 10 06 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
IUOE OPERATING ENGINEERS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

D	D
3	0

Y	Y	Y	Y
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</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		5104.23
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	9127.47									
(c) Total Receipts (from Line 19)	38794.95	124028.19								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	47922.42	129132.42								
7. Total Disbursements (from Line 31)	46505.00	127715.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	1417.42	1417.42								
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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
IUOE OPERATING ENGINEERS

Report Covering the Period: From:

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	9

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)	0.00	0.00
(ii) Unitemized	38794.95	124028.19
(iii) TOTAL (add Lines 11(a)(i) and (ii)	38794.95	124028.19
(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)	38794.95	124028.19
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))	38794.95	124028.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	38794.95	124028.19

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.....	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.....	46505.00	127715.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	46505.00	127715.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	46505.00	127715.00

DETAILED SUMMARY PAGE
of Disbursements

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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)	38794.95	124028.19
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	38794.95	124028.19
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 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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) MARPLE TWP 2009 MARPLE TWP VICTORY COMM	Transaction ID: SB29.6476 Date of Disbursement
	Mailing Address 1901 OLD WEST CHESTER PIKE	<input type="text" value="09"/> <input type="text" value="25"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code HAVERTOWN PA 19083	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="400.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) ASPLEN ASPLEN FOR DA	Transaction ID: SB29.6400 Date of Disbursement
	Mailing Address P.O. BOX 463	<input type="text" value="07"/> <input type="text" value="22"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code DOYLESTOWN PA 18901	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) ASPLEN ASPLEN FOR DA	Transaction ID: SB29.6462 Date of Disbursement
	Mailing Address P.O. BOX 463	<input type="text" value="09"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City State Zip Code DOYLESTOWN PA 18901	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1900.00"/>
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 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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) BUCKS BUCKS COUNTY DEMOCRATE COMM	Transaction ID: SB29.6392 Date of Disbursement
	Mailing Address 17 WEST COURT ST	<input type="text" value="07"/> <input type="text" value="16"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City DOYLESTOWN State PA Zip Code 18901	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="800.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) BUCKS BUCKS COUNTY DEMOCRATE COMM	Transaction ID: SB29.6480 Date of Disbursement
	Mailing Address 17 WEST COURT ST	<input type="text" value="09"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City DOYLESTOWN State PA Zip Code 18901	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="1000.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) CHESTER CHESTER COUNTY DEMO COMM	Transaction ID: SB29.6474 Date of Disbursement
	Mailing Address 37 S. HIGH ST	<input type="text" value="09"/> <input type="text" value="24"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City WEST CHESTER State PA Zip Code 19380	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="390.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2190.00"/>
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 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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) BUCKS COMM FOR A BETTER BUCKS	Transaction ID: SB29.6449 Date of Disbursement 09 / 16 / 2009	
	Mailing Address 10 E. COURT ST		
	City DOYLESTOWN State PA Zip Code 18904	Amount of Each Disbursement this Period	500.00
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) JOSEPH COMM RE-ELECT J. DIGIROLAMO	Transaction ID: SB29.6441 Date of Disbursement 09 / 15 / 2009	
	Mailing Address 3886 GRACE AVE		
	City BENSALEM State PA Zip Code 19020	Amount of Each Disbursement this Period	1000.00
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
C.	Full Name (Last, First, Middle Initial) ADAM COMM TO ELECT ADAM BELOFF	Transaction ID: SB29.6470 Date of Disbursement 09 / 24 / 2009	
	Mailing Address 2 PENN CTR PL. 1500 J.F. KENNEDY B STE 910		
	City PHILADELPHIA State PA Zip Code 19102	Amount of Each Disbursement this Period	250.00
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional)	1750.00
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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) JOSEPH COMM TO ELECT JOS. DIGIROLAMO	Transaction ID: SB29.6407
	Mailing Address 2400 BYBERRY RD.	Date of Disbursement MM / DD / YYYY 08 / 04 / 2009
	City BENSLEM State PA Zip Code 19020	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) OBERLE COMM TO ELECT OBERLE	Transaction ID: SB29.6466
	Mailing Address 2 DANVERS WAY	Date of Disbursement MM / DD / YYYY 09 / 21 / 2009
	City NEWARK State PA Zip Code 19702	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) RICK COMM TO ELECT RICK TAYLOR	Transaction ID: SB29.6424
	Mailing Address P.O. BOX 866	Date of Disbursement MM / DD / YYYY 08 / 26 / 2009
	City AMBLER State PA Zip Code 19002	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" 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)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) JOHN COMM TO RE-ELECT J. TAYLOR	Transaction ID: SB29.6402 Date of Disbursement
	Mailing Address 1205 LOCUST ST - STE. 100	<input type="text" value="07"/> <input type="text" value="30"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City PHILA. State PA Zip Code 19107	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="400.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) JOHN COMM TO RE-ELECT J. TAYLOR	Transaction ID: SB29.6456 Date of Disbursement
	Mailing Address 1205 LOCUST ST - STE. 100	<input type="text" value="09"/> <input type="text" value="17"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City PHILA. State PA Zip Code 19107	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="1500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) DEMOCRATE DEM. CAMPAIGN COMM OF PHILA	Transaction ID: SB29.6479 Date of Disbursement
	Mailing Address 1421 WALNUT ST	<input type="text" value="09"/> <input type="text" value="28"/> / <input type="text" value="20"/> <input type="text" value="09"/>
	City PHILA. State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="1500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3400.00"/>
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 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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
DEMOCRATIC DEMO. COUNTY COMM.

Mailing Address 434 WALNUT ST

City READING State PA Zip Code 19601

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6472

Date of Disbursement

09 / 24 / 2009

Amount of Each Disbursement this Period

400.00

B. Full Name (Last, First, Middle Initial)
EIRENSBERGER EIRNSBERGER FOR JUDGE

Mailing Address 5116 BAYARD ST

City PITTSBURGH State PA Zip Code 15237

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6426

Date of Disbursement

08 / 26 / 2009

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
JAMES FIRM OF US TAX CONSULTANTS

Mailing Address 2801 MAXWELL ST.

City PHILA. State PA Zip Code 19136

Purpose of Disbursement
ACCOUNTANT

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6386

Date of Disbursement

07 / 02 / 2009

Amount of Each Disbursement this Period

150.00

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 12 / 26

<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)
IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)
JAMES FIRM OF US TAX CONSULTANTS

Transaction ID: SB29.6465

Date of Disbursement

Mailing Address 2801 MAXWELL ST.

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

City PHILA. State PA Zip Code 19136

Amount of Each Disbursement this Period

150.00

Purpose of Disbursement

ACCOUNTANT

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
DUKE FRIENDS - SHERIFF D DONNELLY

Transaction ID: SB29.6445

Date of Disbursement

Mailing Address 1835 LAFAYETT DR.

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	6		2	0	0	9

City SOUTHAMPTON State PA Zip Code 18966

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement

CAMPAIGN CONTRI.

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
ALLEN FRIENDS OF A. BUTKOWITZ

Transaction ID: SB29.6430

Date of Disbursement

Mailing Address 7730 RICHARD ST

M	M	/	D	D	/	Y	Y	Y	Y
0	8		2	6		2	0	0	9

City PHILA. State PA Zip Code 19152

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement

CAMPAIGN CONTRI.

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

1650.00

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

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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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) BRENDA FRIENDS OF B. BOYLE	Transaction ID: SB29.6451 Date of Disbursement
	Mailing Address 518 BURGESS ST	<input type="text" value="09"/> / <input type="text" value="17"/> / <input type="text" value="2009"/>
	City PHILADELPHIA State PA Zip Code 19116	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="900.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) CURTIS FRIENDS OF C. JONES	Transaction ID: SB29.6388 Date of Disbursement
	Mailing Address 100 S. BROAD ST. STE 1530	<input type="text" value="07"/> / <input type="text" value="15"/> / <input type="text" value="2009"/>
	City PHILA State PA Zip Code 19110	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="1000.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C.	Full Name (Last, First, Middle Initial) CHERYL FRIENDS OF CHERYL LEE	Transaction ID: SB29.6394 Date of Disbursement
	Mailing Address 506 CORPORATE DR.	<input type="text" value="07"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City LANGHORNE State AA Zip Code 19043	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="500.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2400.00"/>
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 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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
DALE FRIENDS OF DALE REPP

Mailing Address P.O. BOX 1316

City POTTSVILLE State PA Zip Code 17901

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6435

Date of Disbursement

09 / 03 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
DAVE FRIENDS OF DAVE THOMPSON

Mailing Address 1528 WALNUT ST - STE 1100

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6447

Date of Disbursement

09 / 16 / 2009

Amount of Each Disbursement this Period

240.00

C. Full Name (Last, First, Middle Initial)
DENNY FRIENDS OF DENNY O'BRIEN

Mailing Address P.O. BOX 16015

City PHILA State PA Zip Code 19114

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6428

Date of Disbursement

08 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

1740.00

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
FRANK FRIENDS OF FRANK FARRY

Mailing Address P.O. BOX 231

City LANGHORNE State PA Zip Code 19047

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6485

Date of Disbursement

09 / 29 / 2009

Amount of Each Disbursement this Period

1000.00

B. Full Name (Last, First, Middle Initial)
FRANK FRIENDS OF FRANK PIZZELLA

Mailing Address 159 IROQUOIS AVE.

City PLAINS State PA Zip Code 18702

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6410

Date of Disbursement

08 / 04 / 2009

Amount of Each Disbursement this Period

300.00

C. Full Name (Last, First, Middle Initial)
HILLARY FRIENDS OF HILLARY KWIA TEK

Mailing Address 638 SPRING ST

City BETHLEHEM State PA Zip Code 18018

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6422

Date of Disbursement

08 / 26 / 2009

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1550.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) JOE FRIENDS OF JOE GROODY <hr/> Mailing Address 2003 WALNUT ST <hr/> City ASHLAND State PA Zip Code 17921 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6390 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) JOHN FRIENDS OF JOHN PERZEL <hr/> Mailing Address P.O. BOX 826 <hr/> City HARRISBURG State PA Zip Code 17108 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6432 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) JOHN FRIENDS OF JOHN ZURZOLA <hr/> Mailing Address P.O. BOX 923 <hr/> City NORRISTOWN State PA Zip Code 19402 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6463 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 500.00

SUBTOTAL of Disbursements This Page (optional) ▶	2000.00
TOTAL This Period (last page this line number only) ▶	[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)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) MARIO FRIENDS OF MARIO CIVERA	Transaction ID: SB29.6433 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9	
	Mailing Address P.O. BOX 682		
	City State Zip Code PILGRIM GARDENS PA 19026	Amount of Each Disbursement this Period 750.00	
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
B.	Full Name (Last, First, Middle Initial) MORRISVILLE FRIENDS OF MORRISVILLE DEMO.	Transaction ID: SB29.6414 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 1 0 / 2 0 0 9	
	Mailing Address 115 GRANDVIEW AVE		
	City State Zip Code MORRISVILLE PA 19067	Amount of Each Disbursement this Period 500.00	
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
C.	Full Name (Last, First, Middle Initial) SCOTT FRIENDS OF SCOTT PETRI	Transaction ID: SB29.6457 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 9	
	Mailing Address P.O. BOX 161		
	City State Zip Code RICHBORO PA 18954	Amount of Each Disbursement this Period 800.00	
	Purpose of Disbursement CAMPAIGN CONTRI.		
	Candidate Name	Category/ Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶

2050.00

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 / 26

<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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) SHARIF FRIENDS OF SHARIF STREET <hr/> Mailing Address 1650 ARCH ST - 22ND FLR. <hr/> City PHILA. State PA Zip Code 19103 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6406 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 250.00
B.	Full Name (Last, First, Middle Initial) STEPHEN FRIENDS OF STEPHEN BARRAN <hr/> Mailing Address 12 BERNARD ST <hr/> City ASTON State PA Zip Code 19018 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6434 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 0 3 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) WASHO/O'BRIEN FRIENDS OF WASHO & O'BRIEN <hr/> Mailing Address P.O. BOX 68 <hr/> City SCRANTON State PA Zip Code 18501 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6412 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 250.00

SUBTOTAL of Disbursements This Page (optional) ▶	800.00
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)
IUOE OPERATING ENGINEERS

<p>A. Full Name (Last, First, Middle Initial) GLOUCESTER GLOUCESTER COUNTY DEMO. COMM</p> <p>Mailing Address P.O. BOX 751</p> <p>City WOODBURY State NJ Zip Code 08096</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6398</p> <p>Date of Disbursement 07 / 20 / 2009</p> <p>Amount of Each Disbursement this Period 4000.00</p>
<p>B. Full Name (Last, First, Middle Initial) JOHN JOHN GALLOWAY FOR STATE REP.</p> <p>Mailing Address 221 YARDLEY AVE</p> <p>City FALLSINGTON State PA Zip Code 19054</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6478</p> <p>Date of Disbursement 09 / 28 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) JACK JUDGE J.PANELLA SUPREME CT</p> <p>Mailing Address P.O. BOX 391</p> <p>City HARRISBURG State PA Zip Code 17108</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6401</p> <p>Date of Disbursement 07 / 30 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5500.00

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)
IUOE OPERATING ENGINEERS

<p>A. Full Name (Last, First, Middle Initial) JACK JUDGE J.PANELLA SUPREME CT</p> <p>Mailing Address P.O. BOX 391</p> <p>City HARRISBURG State PA Zip Code 17108</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6418</p> <p>Date of Disbursement 08 / 19 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) KENNY KENNY FOR COUNCIL</p> <p>Mailing Address P.O. BOX 60065</p> <p>City PHILA State PA Zip Code 19102</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6383</p> <p>Date of Disbursement 07 / 01 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>C. Full Name (Last, First, Middle Initial) KENNY KENNY FOR COUNCIL</p> <p>Mailing Address P.O. BOX 60065</p> <p>City PHILA State PA Zip Code 19102</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</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: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6425</p> <p>Date of Disbursement 08 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

<p>SUBTOTAL of Disbursements This Page (optional)</p>	<p>2000.00</p>
<p>TOTAL This Period (last page this line number only)</p>	

**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 22 / 26

<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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
LOU L.HERSHMAN - ALLENTOWN COUNCIL

Mailing Address 405 N. GILMORE ST

City ALLENTOWN State PA Zip Code 18107

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6483

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
HARRISBURG LEADERSHIP FOR HARRISBURG

Mailing Address P.O. BOX 1196

City HARRISBURG State PA Zip Code 17108

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6468

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MIDDLETOWN MIDDLETOWN UITED

Mailing Address 1565 W. MAPLE AVE

City LANGHORNE State PA Zip Code 19017

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6437

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

<p>A.</p> <p>Full Name (Last, First, Middle Initial) MONTGOMERY MONTGOMERY COUNTY DEMO COMM</p> <p>Mailing Address 14W. MARSHALL ST.</p> <p>City NORRISTOWN State PA Zip Code 19401</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6459</p> <p>Date of Disbursement 09 / 17 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AFL/CIO PHILA COUNCIL AFL/CIO</p> <p>Mailing Address 22 S. 22ND STREET</p> <p>City PHILA. State PA Zip Code 19103</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6417</p> <p>Date of Disbursement 08 / 13 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) POTTSVILLE POTTSVILLE CITY DEMO. COMM.</p> <p>Mailing Address P.O. BOX 66</p> <p>City POTTSVILLE State PA Zip Code 17901</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6396</p> <p>Date of Disbursement 07 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</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**

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Detailed Summary Page

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(check only one)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) BURNS RE-ELECT JUDGE BURNS <hr/> Mailing Address 1 OXFORD VALLEY STE 301 <hr/> City LANGHORNE State PA Zip Code 19047 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6408 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 4 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) MIKE RE-ELECT MIKE STACK <hr/> Mailing Address P.O. BOX 21114 <hr/> City PHILADELPHIA State PA Zip Code 19114 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6454 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 7 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) SPRINGFIELD SPRINGFIELD REP. PARTY <hr/> Mailing Address P.O. BOX 423 <hr/> City SPRINGFIELD State PA Zip Code 19064 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6405 Date of Disbursement M M / D D / Y Y Y Y 0 7 / 3 0 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00

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)

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

<p>A. Full Name (Last, First, Middle Initial) SPRINGFIELD SPRINGFIELD REP. PARTY</p> <p>Mailing Address P.O. BOX 423</p> <p>City SPRINGFIELD State PA Zip Code 19064</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6443</p> <p>Date of Disbursement 09 / 16 / 2009</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) TOMLINSON TOMLINSON FOR STATE SENATE</p> <p>Mailing Address 2207 BRISTOL PIKE</p> <p>City BENSALEM State PA Zip Code 19020</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6429</p> <p>Date of Disbursement 08 / 26 / 2009</p> <p>Amount of Each Disbursement this Period 2000.00</p>
<p>C. Full Name (Last, First, Middle Initial) HORSHAM TWP COUNCIL - BETTER HORSHAM</p> <p>Mailing Address 496 GROUSE CIR.</p> <p>City AMBLER State PA Zip Code 19002</p> <p>Purpose of Disbursement CAMPAIGN CONTRI.</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6481</p> <p>Date of Disbursement 09 / 29 / 2009</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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

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

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

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NAME OF COMMITTEE (In Full)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) UPPER DARBY UPPER DARBY REP. COMM		Transaction ID: SB29.6461	
	Mailing Address 5035 TOWNSHIP LANE		Date of Disbursement 09 / 17 / 2009	
City DREXEL HILL		State PA	Zip Code 19026	
Purpose of Disbursement CAMPAIGN CONTRI.			Amount of Each Disbursement this Period 1000.00	
Candidate Name			Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

SUBTOTAL of Disbursements This Page (optional)	1000.00
TOTAL This Period (last page this line number only)	45580.00