REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee
(Summary Page)

RECEIVED
FEDERAL ELECTION
COMMISSION
MAIL ROOM

JUL 19 1 44 PM '96

USE FEC MAILING LABEL OR TYPE OR PRINT

1. NAME OF COMMITTEE (in full)
SHEET METAL WORKERS' INTERNATIONAL ASSOCIATION LOCAL 28 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) ☐ Check if different than previously reported
500 GREENWICH STREET

CITY, STATE and ZIP CODE
NEW YORK, NY 10013

2. FEC IDENTIFICATION NUMBER
C 00169490

3. ☐ This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

4. TYPE OF REPORT

(a) ☒ April 15 Quarterly Report

☐ July 15 Quarterly Report

☐ October 15 Quarterly Report

☐ January 31 Year End Report

☐ July 31 Mid Year Report (Non-election Year Only)

☐ Termination Report

Monthly Report Due On:

☐ February 20	☐ June 20	☐ October 20
☐ March 20	☐ July 20	☐ November 20
☐ April 20	☐ August 20	☐ December 20
☐ May 20	☐ September 20	☐ January 31

☐ Twelfth day report preceding _____ (Type of Election) election on _____ in the State of _____

☐ Thirtieth day report following the General Election on _____ in the State of _____.

(b) Is this Report an Amendment? ☒ YES ☐ NO

SUMMARY	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. Covering Period Jan 1 1996 through Mar 31, 1996		
6. (a) Cash on Hand January 1, 19 96		$ 44455
(b) Cash on Hand at Beginning of Reporting Period	$ 44455	
(c) Total Receipts (from Line 19)	$ 21799	$ 21799
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	$ 66254	$ 66254
7. Total Disbursements (from Line 30)	$ 20248	$ 20248
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	$ 46006	$ 46006
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	$ 0	

For further information contact:
Federal Election Commission
999 E Street, NW
Washington, DC 20463
Toll Free 800-424-9530
Local 202-219-3420

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
JOHN HARRINGTON

Signature of Treasurer
John Harrington

Date
7/17/96

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

FEC FORM 3X
(revised 9/93)

FEC/ANDER

2 copies to Gen'l
7/17/96

DETAILED SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS
PAGE 2, FEC FORM 3X

(revised 1/1/91)

NAME OF COMMITTEE: SMWIA Local 28 Political Action Committee

REPORT COVERING PERIOD FROM 1/1/96 TO: 3/31/96

	COLUMN A Total This Period	COLUMN B Calendar Year	
I. Receipts			
11. Contributions (other than loans) From:			
a. Individual/Persons Other Than Political Committees			
i. Itemized (use Schedule A)			11(a)(i)
ii. Unitemized	20 199	20199	11(a)(ii)
iii. Total (add i and ii) ➤	20 199	20 199	11(a)(iii)
b. Political Party Committees			11(b)
c. Other Political Committees (such as PACs)			11(c)
d. Total Contributions (add a iii, b and c) ➤	20199	20199	11(d)
12. Transfers From Affiliated/Other Party Committees			12
13. All Loans Received			13
14. Loan Repayments Received			14
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.)			15
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees	1600	1600	16
17. Other Federal Receipts (Dividends, Interest, etc.)			17
18. Transfers from Nonfederal Account for Joint Activity			18
19. Total Receipts (add 11d, 12, 13, 14, 15, 16, 17, and 18) ➤	21799	21799	19
20. Total Federal Receipts (subtract line 18 from line 19) ➤	21799	21799	20
II. Disbursements			
21. Operating Expenditures:			
a. Shared Federal/Non-Federal Activity (from Schedule H4)			
i. Federal Share			21(a)(i)
ii. Non-Federal Share			21(a)(ii)
b. Other Federal Operating Expenditures	13548	13548	21(b)
c. Total Operating Expenditures (add a i, a ii, and b) ➤	13548	13548	21(c)
22. Transfers to Affiliated/Other Party Committees			22
23. Contributions to Federal Candidates/Committees and Other Political Committees			23
24. Independent Expenditures (use Schedule E)			24
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)			25
26. Loan Repayments Made			26
27. Loans Made			27
28. Refunds of Contributions To:			
a. Individuals/Persons Other Than Political Committees			28(a)
b. Political Party Committees			28(b)
c. Other Political Committees (such as PACs)			28(c)
d. Total Contribution Refunds (add a, b and c) ➤			28(d)
29. Other Disbursements	6700	6700	29
30. Total Disbursements (add 21c, 22, 23, 24, 25, 26, 27, 28d, and 29) ➤	20248	20248	30
31. Total Federal Disbursements (subtract line 21 a ii from line 30) ➤	20248	20248	31
III. Net Contributions/Operating Expenditures			
32. Total Contributions (other than loans)(from line 11d)	21799	21799	32
33. Total Contribution Refunds (from line 28d)			33
34. Net Contributions (other than loans)(subtract line 33 from 32)	21799	21799	34
35. Total Federal Operating Expenditures (add 21 a i and 21 b) ➤	20248	20248	35
36. Offsets to Operating Expenditures (from line 15)			36
37. Net Operating Expenditures (subtract line 36 from 35) ➤	20248	20248	37

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SCHEDULE A **ITEMIZED RECEIPTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 16

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)

SMWIA LOCAL 28 POLITICAL ACTION COMMITTEE

A. Full Name, Mailing Address and ZIP Code FRIENDS OF BOB GAFFNEY PO BOX 5418 HAUPPAUGE NY 11788 Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year) 1/2/96	Amount of Each Receipt this Period 1600
B. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
C. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
D. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
E. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
F. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period
G. Full Name, Mailing Address and ZIP Code Receipt For: ☐ Primary ☐ General ☐ Other (specify):	Name of Employer Occupation Aggregate Year-to-Date $	Date (month, day, year)	Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)	1600
TOTAL This Period (last page this line number only)	1600

FE6/MC38

SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 1 OF 2
	FOR LINE NUMBER 21 b

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NAME OF COMMITTEE (in Full)
SMWIA LOCAL 28 POLITICAL ACTION COMMITTEE

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code 28 REALTY INC 500 GREENWICH STREET NEW YORK NY 10014	RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/9/96	370
B. Full Name, Mailing Address and ZIP Code SMWIA PAL EDUCATION FUND 1750 NEW YORK AVENUE NW WASHINGTON, DC 20006-5386	CHARITABLE CONTRIBUTION Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/19/96	10000
C. Full Name, Mailing Address and ZIP Code KOPS EDWARDS TOPPLE + LEVIDOW 200 OLD COUNTRY ROAD MINEOLA NY 11501	ACCOUNTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	1/9/96	420
D. Full Name, Mailing Address and ZIP Code 28 REALTY INC 500 GREENWICH STREET NEW YORK, NY 10014	RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/13/96	375
E. Full Name, Mailing Address and ZIP Code KOPS EDWARDS TOPPLE + LEVIDOW 200 OLD COUNTRY ROAD MINEOLA NY 11501	ACCOUNTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/13/96	700
F. Full Name, Mailing Address and ZIP Code 28 REALTY INC 500 GREENWICH STREET NEW YORK NY 10014	RENT Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/6/96	380
G. Full Name, Mailing Address and ZIP Code KOPS EDWARDS TOPPLE + LEVIDOW 200 OLD COUNTRY ROAD MINEOLA NY 11501	ACCOUNTING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/96	600
H. Full Name, Mailing Address and ZIP Code BLDG + CONSTRUCTION TRADES DEPT 815 16TH STREET NW SUITE 603 WASHINGTON DC 20006	MEETING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/96	300
I. Full Name, Mailing Address and ZIP Code NYS BLDG + CONSTRUCTION TRADES COUNCIL 890 THIRD AVENUE ALBANY NY 12206	MEETING Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/28/96	300

SUBTOTAL of Disbursements This Page (optional)	13445
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

Use separate schedule(s) for each category of the Detailed Summary Page	PAGE 2 OF 2
	FOR LINE NUMBER 21b

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NAME OF COMMITTEE (In Full)

SMWIA Local 28 Political Action Committee

A. Full Name, Mailing Address and ZIP Code Chase Manhattan Bank 345 Hudson Street New York, NY 10014	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period 103
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	
TOTAL This Period (last page this line number only)	13548

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF ✓

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)
SMWIA Local 28 Political Action Committee

Name, Mailing Address and ZIP Code	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Friends of Badillo c/o Fischbein, Badillo, Wagner & Kiler 909 Third Avenue New York NY 10022	NYC Comptroller Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	4/13/96	1000
B. Friends of Jim Wrynn 82-41 230th Street Bellrose Manor, NY 11427	NYS Assembly Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/15/96	200
C. Suffolk County Democratic Club 467 Route 112 Patchogue NY 11772	Various Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	2/15/96	500
D. Babylon Town Democratic Committee c/o The Schaefer Team Po Box 48 Babylon, NY 11702	Various Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/6/96	2000
E. Senator Marty Markowitz Committee c/o Marcia Rothman, Treasurer 1609 Falmouth Avenue New Hyde Park NY 11040	NYS Senate Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/12/96	200
F. Citizens to Elect Don Blydenburgh 740 Veterans Memorial Highway Suite 304 Hauppauge NY 11788	Suffolk County Legislature Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/12/96	450
G. Election Fund of Jim Krone 18 Gaston Avenue Garfield NJ 07026	Mayor – Garfield NJ Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/96	1000
H. People for Paul Tonna Po Box 1728 Huntington Station, NY 11746	NYS Legislature Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/96	250
I. Ann Favicchio, Treasurer Denis J. Butler, Assemblyman 31-35 46 Street Long Island City NY 11103	NYS Assembly Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/18/96	500

SUBTOTAL of Disbursements This Page (optional)	6100
TOTAL This Period (last page this line number only)	

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SCHEDULE B **ITEMIZED DISBURSEMENTS**

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

PAGE 1 OF 1

FOR LINE NUMBER 29

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NAME OF COMMITTEE (In Full)

SMWIA Local 28 Political Action Committee

	Purpose of Disbursement	Date (month, day, year)	Amount of Each Disbursement This Period
A. Full Name, Mailing Address and ZIP Code Citizens for Brian McLaughlin PO Box 54-1311 Flushing NY 11354	NYS Assembly Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	3/28/96	600
B. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
C. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
D. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
E. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
F. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
G. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
H. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period
I. Full Name, Mailing Address and ZIP Code	Purpose of Disbursement Disbursement for: ☐ Primary ☐ General ☐ Other (specify)	Date (month, day, year)	Amount of Each Disbursement This Period

SUBTOTAL of Disbursements This Page (optional)	600
TOTAL This Period (last page this line number only)	6700

FES AN068

SCHEDULE D
(Revised 3/80)

DEBTS AND OBLIGATIONS
Excluding Loans

Page ____ of ____ for
LINE NUMBER _____
(Use separate schedules for each numbered line)

Name of Committee (in Full)	Outstanding Balance Beginning This Period	Amount Incurred This Period	Payment This Period	Outstanding Balance at Close of This Period
SMWIA Local 28 Political Action Committee				
A. Full Name, Mailing Address and ZIP Code of Debtor or Creditor SMWIA Local 28 Escrow Account 500 Greenwich Street New York, NY 10013	0	20199	20199	0
Nature of Debt (Purpose):				
B. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
C. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
D. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
E. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				
F. Full Name, Mailing Address and ZIP Code of Debtor or Creditor				
Nature of Debt (Purpose):				

1) SUBTOTALS This Period This Page (optional)	
2) TOTALS This Period (last page in this line only)	
3) TOTAL OUTSTANDING LOANS from Schedule C (last page only)	
4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only)	

FE5ANO5B

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

☐	Hand Delivered	DATE OF RECEIPT
☐	First Class Mail	POSTMARKED
☑	Registered/Certified Mail	POSTMARKED 7/15/96
☐	No Postmark	
☐	Postmark Illegible	
☐	Received from the House Office of Records and Registration	DATE OF RECEIPT
☐	Received from the Senate Office of Public Records	DATE OF RECEIPT
☐	Other (Specify):	POSTMARKED and/or DATE OF RECEIPT

E.S. — PREPARER

7/19/96 — DATE PREPARED

FEC FORM 70-2 (12/92)