

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 STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) P.O. BOX 4187 136 MOUNT BETHEL ROAD WARREN NJ 07059 Check if different than previously reported. (ACC)

2. FEC IDENTIFICATION NUMBER C00252395 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 Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day Report for the: Post-Election, General, Runoff, Special

5. Covering Period 01 01 2007 through 06 30 2007

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 THOMAS MANNING

Signature of Treasurer Electronically Filed by THOMAS MANNING Date 07 25 2007

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

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

	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>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7		81124.58
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period	81124.58									
(c) Total Receipts (from Line 19)	70674.02	70674.02								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	151798.60	151798.60								
7. Total Disbursements (from Line 31)	108503.39	108503.39								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	43295.21	43295.21								
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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	0	7

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	70174.02	70174.02
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized		
(iii) TOTAL (add Lines 11(a)(i) and (ii)	70174.02	70174.02
(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)	70174.02	70174.02
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	500.00	500.00
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))	70674.02	70674.02
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	70674.02	70674.02

DETAILED SUMMARY PAGE

of Disbursements

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.....	43703.39	43703.39
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	43703.39	43703.39
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	11650.00	11650.00
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.....	53150.00	53150.00
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))..	108503.39	108503.39
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	108503.39	108503.39

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)	70174.02	70174.02
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	70174.02	70174.02
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	43703.39	43703.39
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	43703.39	43703.39

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

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

FOR LINE NUMBER: PAGE 6 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
855.80

Date of Receipt
01 / 05 / 2007

Transaction ID: SA11A1.5595

Amount of Each Receipt this Period
855.80

PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15164.95

Date of Receipt
01 / 05 / 2007

Transaction ID: SA11A1.5596

Amount of Each Receipt this Period
14309.15

PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
15721.09

Date of Receipt
01 / 05 / 2007

Transaction ID: SA11A1.5597

Amount of Each Receipt this Period
556.14

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional) ► 15721.09

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

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

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

FOR LINE NUMBER: PAGE 7 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 27637.01

Date of Receipt
M M / D D / Y Y Y Y
0 2 / 1 2 / 2 0 0 7

Transaction ID: SA11A1.5615

Amount of Each Receipt this Period
11915.92

PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 37239.54

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 0 / 2 0 0 7

Transaction ID: SA11A1.5642

Amount of Each Receipt this Period
9602.53

PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

FEC ID number of contributing federal political committee. C

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼

Aggregate Year-to-Date ▼ 38241.89

Date of Receipt
M M / D D / Y Y Y Y
0 3 / 2 8 / 2 0 0 7

Transaction ID: SA11A1.5643

Amount of Each Receipt this Period
1002.35

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional) 22520.80

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 8 / 47
	<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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City WARREN State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
38397.89

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	0	/	2	0	0	7

Transaction ID: SA11A1.5644

Amount of Each Receipt this Period
156.00

PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City WARREN State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39032.03

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	5	/	2	0	0	7

Transaction ID: SA11A1.5664

Amount of Each Receipt this Period
634.14

PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City WARREN State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
39822.70

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	4	/	0	6	/	2	0	0	7

Transaction ID: SA11A1.5666

Amount of Each Receipt this Period
790.67

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional)	▶	1580.81
TOTAL This Period (last page this line number only)	▶	

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

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

FOR LINE NUMBER: PAGE 9 / 47
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
47417.58

Date of Receipt
M M / D D / Y Y Y Y Y
0 4 / 0 9 / 2 0 0 7

Transaction ID: SA11A1.5665

Amount of Each Receipt this Period
7594.88

PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
48693.64

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 0 7 / 2 0 0 7

Transaction ID: SA11A1.5704

Amount of Each Receipt this Period
1276.06

PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60548.97

Date of Receipt
M M / D D / Y Y Y Y Y
0 5 / 1 5 / 2 0 0 7

Transaction ID: SA11A1.5705

Amount of Each Receipt this Period
11855.33

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional) ► **20726.27**

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 47
(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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
60552.54

Date of Receipt
MM / DD / YYYY
05 / 31 / 2007

Transaction ID: SA11A1.5703

Amount of Each Receipt this Period
3.57

PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
68186.23

Date of Receipt
MM / DD / YYYY
06 / 06 / 2007

Transaction ID: SA11A1.5730

Amount of Each Receipt this Period
7633.69

PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City State Zip Code
WARREN NJ 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
69174.02

Date of Receipt
MM / DD / YYYY
06 / 11 / 2007

Transaction ID: SA11A1.5731

Amount of Each Receipt this Period
987.79

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional)	8625.05
TOTAL This Period (last page this line number only)	

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

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 47	
	(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"/> 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
Steamfitters Local Union 475

Mailing Address PO BOX 4187

City	State	Zip Code
WARREN	NJ	07059

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

Name of Employer	Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
70174.02

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	5	/	2	0	0	7

Transaction ID: SA11A1.5729

Amount of Each Receipt this Period
1000.00

Transfer into new bank account

SUBTOTAL of Receipts This Page (optional)	▶	1000.00
TOTAL This Period (last page this line number only)	▶	70174.02

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 12 / 47	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
 Manzo for Assembly

Mailing Address P.O. Box 3945

City State Zip Code
 Jersey City NJ 07303

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
 500.00

Date of Receipt
 M M / D D / Y Y Y Y
 06 / 01 / 2007

Transaction ID: SA16.5732

Amount of Each Receipt this Period
 500.00

VOIDED - NEVER CASHED

SUBTOTAL of Receipts This Page (optional)	▶	500.00
TOTAL This Period (last page this line number only)	▶	500.00

**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)

PAGE 13 / 47

<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. American Express		Transaction ID: SB21B.5645 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 1027.08
City Newark State NJ Zip Code 07101	Purpose of Disbursement WALK TO WASHINGTON - 3 ROOMS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. American Express		Transaction ID: SB21B.5706 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 310.00
City Newark State NJ Zip Code 07101	Purpose of Disbursement NJ SEED - TRAIN Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. American Express		Transaction ID: SB21B.5739 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address PO Box 1270		Amount of Each Disbursement this Period 684.00
City Newark State NJ Zip Code 07101	Purpose of Disbursement AFL-CIO CONF LODGING Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	2021.08
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Borgota Hotel Casino		Transaction ID: SB21B.5715 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 8 / 2 0 0 7
Mailing Address One Borgota Way		Amount of Each Disbursement this Period 734.00
City Atlantic City State NJ Zip Code 08401	Purpose of Disbursement 5 ONE NIGHT HOTEL DEPOSITS Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. GREGORY CASEY		Transaction ID: SB21B.5685 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 42 HAZELWOOD AVENUE		Amount of Each Disbursement this Period 150.00
City LIVINGSTON State NJ Zip Code 07039	Purpose of Disbursement NJ SEED CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. GREGORY CASEY		Transaction ID: SB21B.5734 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 42 HAZELWOOD AVENUE		Amount of Each Disbursement this Period 450.00
City LIVINGSTON State NJ Zip Code 07039	Purpose of Disbursement EXPENSES AFL-CIO CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1334.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Courtyard Washington Northwest		Transaction ID: SB21B.5608 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 7
Mailing Address 1900 Connecticut Ave, NW		Amount of Each Disbursement this Period 5994.05
City Washington State DC Zip Code 20009	Purpose of Disbursement 5 ROOMS FOR 3 NIGHTS - NATL BLDG TRADE Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. ROBERT T. HIGGINS		Transaction ID: SB21B.5657 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 35 Sand Bar Drive		Amount of Each Disbursement this Period 450.00
City Bayville State NJ Zip Code 08721	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. ROBERT T. HIGGINS		Transaction ID: SB21B.5660 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 35 Sand Bar Drive		Amount of Each Disbursement this Period 150.00
City Bayville State NJ Zip Code 08721	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	6594.05
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. THOMAS MANNING		Transaction ID: SB21B.5654 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 28 No. Cherokee Lane		Amount of Each Disbursement this Period 450.00
City Brick State NJ Zip Code 08724	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) B. THOMAS MANNING		Transaction ID: SB21B.5663 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 28 No. Cherokee Lane		Amount of Each Disbursement this Period 150.00
City Brick State NJ Zip Code 08724	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

Full Name (Last, First, Middle Initial) C. THOMAS MANNING		Transaction ID: SB21B.5686 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 6 / 2 0 0 7
Mailing Address 28 No. Cherokee Lane		Amount of Each Disbursement this Period 150.00
City Brick State NJ Zip Code 08724	Purpose of Disbursement NJ SEED CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

SUBTOTAL of Disbursements This Page (optional) ▶	750.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. THOMAS MANNING		Transaction ID: SB21B.5737 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 28 No. Cherokee Lane		Amount of Each Disbursement this Period 450.00
City Brick State NJ Zip Code 08724	Purpose of Disbursement EXPENSES AFL-CIO CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. MCANJ - PAC		Transaction ID: SB21B.5754 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address P.O. Box 390		Amount of Each Disbursement this Period 500.00
City Springfield State NJ Zip Code 07081	Purpose of Disbursement FULL PAGE AD Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. TIMOTHY MCCONWAY		Transaction ID: SB21B.5655 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address 75 PARK DRIVE		Amount of Each Disbursement this Period 450.00
City KENILWORTH State NJ Zip Code 07033	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1400.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. TIMOTHY MCCONWAY		Transaction ID: SB21B.5661	
Mailing Address 75 PARK DRIVE		Date of Disbursement MM / DD / YYYY 03 / 20 / 2007	
City KENILWORTH	State NJ	Zip Code 07033	Amount of Each Disbursement this Period 150.00
Purpose of Disbursement NATIONAL BLDG TRADES CONF		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. TIMOTHY MCCONWAY		Transaction ID: SB21B.5738	
Mailing Address 75 PARK DRIVE		Date of Disbursement MM / DD / YYYY 06 / 05 / 2007	
City KENILWORTH	State NJ	Zip Code 07033	Amount of Each Disbursement this Period 450.00
Purpose of Disbursement EXPENSES AFL-CIO CONF		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. John McQuilken		Transaction ID: SB21B.5735	
Mailing Address 573 No. Lake Shore Drive		Date of Disbursement MM / DD / YYYY 06 / 05 / 2007	
City Brick	State NJ	Zip Code 08723	Amount of Each Disbursement this Period 450.00
Purpose of Disbursement EXPENSES AFL-CIO CONF		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Mechanical Allied Crafts Pac Fund		Transaction ID: SB21B.5616	
Mailing Address P.O. Box 82		Date of Disbursement 02 / 06 / 2007	
City Hazlet	State NJ	Zip Code 07730	Amount of Each Disbursement this Period 7200.00
Purpose of Disbursement 2007 COUNCIL FEES		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. MOORE STEPHENS, P.C.		Transaction ID: SB21B.5717	
Mailing Address 340 NORTH AVENUE		Date of Disbursement 05 / 17 / 2007	
City CRANFORD	State NJ	Zip Code 07016	Amount of Each Disbursement this Period 1500.00
Purpose of Disbursement YEAR END 2006		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. Michael Mulvaney		Transaction ID: SB21B.5656	
Mailing Address 890 Roundtree Drive		Date of Disbursement 03 / 20 / 2007	
City Toms River	State NJ	Zip Code 08724	Amount of Each Disbursement this Period 450.00
Purpose of Disbursement NATIONAL BLDG TRADES CONF		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)	9150.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Michael Mulvaney		Transaction ID: SB21B.5756 Date of Disbursement 06 / 15 / 2007	
Mailing Address 890 Roundtree Drive		Amount of Each Disbursement this Period 150.00	
City Toms River State NJ Zip Code 08724	Purpose of Disbursement NATIONAL BLD TRADES CONF Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. NJ Seed		Transaction ID: SB21B.5609 Date of Disbursement 01 / 10 / 2007	
Mailing Address 479 W. State Street		Amount of Each Disbursement this Period 500.00	
City Trenton State NJ Zip Code 08618	Purpose of Disbursement 2007 Dues Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. NJ Seed		Transaction ID: SB21B.5639 Date of Disbursement 02 / 26 / 2007	
Mailing Address 479 W. State Street		Amount of Each Disbursement this Period 500.00	
City Trenton State NJ Zip Code 08618	Purpose of Disbursement 2 REGISTRATIONS CONGRESSIONAL BRIEFING Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1150.00
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NJ STATE AFL-CIO		Transaction ID: SB21B.5716 Date of Disbursement
Mailing Address 106 WEST STATE STREET		<input type="text" value="05"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City TRENTON	State NJ	Zip Code 08608
Purpose of Disbursement 5 REGISTRATIONS AND LUNCHEON	<input type="text" value="1175.00"/>	
Candidate Name	Category/Type	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5598 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="01"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 94689 HOURS FOR DECEMBER 06	<input type="text" value="1893.78"/>	
Candidate Name	Category/Type	
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5618 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="02"/> <input type="text" value="06"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 70693 HOURS FOR JAN 2007	<input type="text" value="1413.86"/>	
Candidate Name	Category/Type	
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) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="4482.64"/>
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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5650 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 64015 HOURS FOR FEB 2007		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1280.30"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5667 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 50631 HOURS FOR MARCH 2007		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1012.62"/>
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) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5707 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="7"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 79033 HOURS FOR APRIL 2007		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1580.66"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3873.58"/>
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND		Transaction ID: SB21B.5747 Date of Disbursement
Mailing Address 534 S. ROUTE 73 P.O. BOX 73		<input type="text" value="06"/> / <input type="text" value="05"/> / <input type="text" value="2007"/>
City WINDSLOW	State NJ	Zip Code 08095
Purpose of Disbursement 50889 HOURS FOR MAY 2007		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="1017.78"/>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) B. ST. GREGORY LUXURY HOTEL		Transaction ID: SB21B.5640 Date of Disbursement
Mailing Address 2033 M Street, NW		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
City Washington	State DC	Zip Code 20036
Purpose of Disbursement 2 ROOMS 1 NIGHT - NJ SEED BRIEFING		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="661.82"/>
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) ▼	
State: District:	Category/Type	

Full Name (Last, First, Middle Initial) C. State of NJ Election Law Enf.		Transaction ID: SB21B.5619 Date of Disbursement
Mailing Address PO Box 185		<input type="text" value="02"/> / <input type="text" value="06"/> / <input type="text" value="2007"/>
City Trenton	State NJ	Zip Code 08625-0185
Purpose of Disbursement LEGISLATIVE AGENT ANNUAL FEE		Amount of Each Disbursement this Period
Candidate Name		<input type="text" value="425.00"/>
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) ▼	
State: District:	Category/Type	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2104.60"/>
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)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Steamfitters Local Union 475		Transaction ID: SB21B.5668 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address PO BOX 4187		Amount of Each Disbursement this Period 2565.14
City WARREN State NJ Zip Code 07059	Purpose of Disbursement REIMBURSE PAYROLL FOR AFL-CIO CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. Steamfitters Local Union 475		Transaction ID: SB21B.5757 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 0 / 2 0 0 7
Mailing Address PO BOX 4187		Amount of Each Disbursement this Period 2078.80
City WARREN State NJ Zip Code 07059	Purpose of Disbursement REIMBURSE PAYROLL FOR AFL-CIO CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. Shaun Sullivan		Transaction ID: SB21B.5659 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7
Mailing Address P.O. Box 4187		Amount of Each Disbursement this Period 450.00
City Warren State NJ Zip Code 07059	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	5093.94
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Shaun Sullivan		Transaction ID: SB21B.5662 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 2 0 / 2 0 0 7	
Mailing Address P.O. Box 4187		Amount of Each Disbursement this Period 150.00	
City Warren State NJ Zip Code 07059	Purpose of Disbursement NATIONAL BLDG TRADES CONF Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) B. U.A. Political Education Fund		Transaction ID: SB21B.5599 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 0 3 / 2 0 0 7	
Mailing Address 901 Massachusetts Ave, NW		Amount of Each Disbursement this Period 946.89	
City Washington State DC Zip Code 20001-4397	Purpose of Disbursement 94689 HOURS FOR DECEMBER 06 Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

Full Name (Last, First, Middle Initial) C. U.A. Political Education Fund		Transaction ID: SB21B.5620 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7	
Mailing Address 901 Massachusetts Ave, NW		Amount of Each Disbursement this Period 706.93	
City Washington State DC Zip Code 20001-4397	Purpose of Disbursement 70693 HOURS FOR JAN 07 Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		

SUBTOTAL of Disbursements This Page (optional) ▶	1803.82
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

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(check only one)

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<input checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. U.A. Political Education Fund		Transaction ID: SB21B.5651 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 2 / 2 0 0 7
Mailing Address 901 Massachusetts Ave, NW		Amount of Each Disbursement this Period 640.15
City Washington State DC Zip Code 20001-4397	Purpose of Disbursement 64015 HOURS FOR FEB 2007 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) B. U.A. Political Education Fund		Transaction ID: SB21B.5669 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 3 / 2 0 0 7
Mailing Address 901 Massachusetts Ave, NW		Amount of Each Disbursement this Period 506.31
City Washington State DC Zip Code 20001-4397	Purpose of Disbursement 50631 HOURS FOR MARCH 2007 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

Full Name (Last, First, Middle Initial) C. U.A. Political Education Fund		Transaction ID: SB21B.5708 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 901 Massachusetts Ave, NW		Amount of Each Disbursement this Period 790.33
City Washington State DC Zip Code 20001-4397	Purpose of Disbursement 79033 HOURS FOR APRIL 2007 Candidate Name	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ▶	1936.79
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 checked="" 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 type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. U.A. Political Education Fund		Transaction ID: SB21B.5748	
Mailing Address 901 Massachusetts Ave, NW		Date of Disbursement MM / DD / YYYY 06 / 05 / 2007	
City Washington	State DC	Zip Code 20001-4397	Amount of Each Disbursement this Period 508.89
Purpose of Disbursement 50889 HOURS FOR MAY 2007		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Andrew Welsh		Transaction ID: SB21B.5733	
Mailing Address 90 Kenilworth Ave		Date of Disbursement MM / DD / YYYY 06 / 05 / 2007	
City Cranford	State NJ	Zip Code 07016	Amount of Each Disbursement this Period 450.00
Purpose of Disbursement EXPENSES AFL-CIO CONF		Category/ Type	
Candidate Name			
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) ▼		
State: District:			

SUBTOTAL of Disbursements This Page (optional)

958.89

TOTAL This Period (last page this line number only)

43703.39

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

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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. DON PAYNE FOR CONGRESS		Transaction ID: SB23.5621 Date of Disbursement
Mailing Address P.O. BOX 2406		<input type="text" value="02"/> <input type="text" value="13"/> / <input type="text" value="2007"/>
City NEWARK	State NJ	Zip Code 07114
Purpose of Disbursement GOLD PAGE AD	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. DON PAYNE FOR CONGRESS		Transaction ID: SB23.5632 Date of Disbursement
Mailing Address P.O. BOX 2406		<input type="text" value="02"/> <input type="text" value="26"/> / <input type="text" value="2007"/>
City NEWARK	State NJ	Zip Code 07114
Purpose of Disbursement 4 TICKETS	<input type="text" value="1400.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Election Fund of Richard J. Codey		Transaction ID: SB23.5750 Date of Disbursement
Mailing Address 196 West State Street		<input type="text" value="06"/> <input type="text" value="15"/> / <input type="text" value="2007"/>
City Trenton	State NJ	Zip Code 08608
Purpose of Disbursement 2 TICKETS	<input type="text" value="3000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 27		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="5400.00"/>
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)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
HILLARY CLINTON FOR PRESIDENT EXPLORATORY COMMITTEE INC.

Mailing Address PO Box 77593

City Washington State DC Zip Code 20013

Purpose of Disbursement 1 TICKET

Candidate Name

Office Sought: House Senate President
State: District: 00

Disbursement For: 2008
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5752
Date of Disbursement
06 / 15 / 2007

Amount of Each Disbursement this Period
1000.00

B. Full Name (Last, First, Middle Initial)
Menendez For Senate, Inc.

Mailing Address 1100 Valley Brook Ave

City Lyndhurst State NJ Zip Code 07071

Purpose of Disbursement 4 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2007
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5678
Date of Disbursement
04 / 09 / 2007

Amount of Each Disbursement this Period
2000.00

C. Full Name (Last, First, Middle Initial)
Pallone For Congress

Mailing Address PO BOX 3176

City LONG BRANCH State NJ Zip Code 07740

Purpose of Disbursement 2 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2007
 Primary General
 Other (specify) ▼

Transaction ID: SB23.5637
Date of Disbursement
02 / 26 / 2007

Amount of Each Disbursement this Period
2000.00

SUBTOTAL of Disbursements This Page (optional)	5000.00
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

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(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Pallone For Congress		Transaction ID: SB23.5721 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7
Mailing Address PO BOX 3176		Amount of Each Disbursement this Period 1000.00
City LONG BRANCH State NJ Zip Code 07740	Category/ Type	
Purpose of Disbursement DONATION FOR 10 GUESTS		
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. SIRES FOR CONGRESS		Transaction ID: SB23.5630 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 6050 BOULEVARD EAST APT 6B		Amount of Each Disbursement this Period 250.00
City WEST NEW YORK State NJ Zip Code 07093	Category/ Type	
Purpose of Disbursement 1 TICKET		
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 13	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional)

1250.00

TOTAL This Period (last page this line number only)

11650.00

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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Bonnie Watson Coleman for Assembly		Transaction ID: SB29.5631 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address Post Office Box 7781		Amount of Each Disbursement this Period 2000.00
City Trenton State NJ Zip Code 08628	Purpose of Disbursement 2 TICKETS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Booker Team For Newark		Transaction ID: SB29.5687 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 10 West Road		Amount of Each Disbursement this Period 1200.00
City West Orange State NJ Zip Code 07052	Purpose of Disbursement 4 TICKETS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee to Elect Patrick Diegnan		Transaction ID: SB29.5740 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address PO Box 736		Amount of Each Disbursement this Period 500.00
City South Plainfield State NJ Zip Code 07080	Purpose of Disbursement 1 TICKET Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	3700.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Committee Re-Elect Mims Hackett Jr.		Transaction ID: SB29.5742 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 155 Polify Road Suite 103, 1st Floor		Amount of Each Disbursement this Period 500.00
City Hackensack State NJ Zip Code 07601		
Purpose of Disbursement 2 TICKETS	Category/ Type	
Candidate Name		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 27	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. Committee Re-Elect Vincent Prieto		Transaction ID: SB29.5610 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 3 / 2 0 0 7
Mailing Address 155 Polify Road Suite 103, 1st Floor		Amount of Each Disbursement this Period 500.00
City Hackensack State NJ Zip Code 07601		
Purpose of Disbursement 2 TICKETS	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. Committee Re-Elect Vincent Prieto		Transaction ID: SB29.5688 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address 155 Polify Road Suite 103, 1st Floor		Amount of Each Disbursement this Period 1200.00
City Hackensack State NJ Zip Code 07601		
Purpose of Disbursement 4 TICKETS	Category/ Type	
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ▶	2200.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. COMMITTEE TO CHANGE		Transaction ID: SB29.5761 Date of Disbursement																					
Mailing Address PO Box 3202		<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>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	4		0	9		2	0	0	7														
City Elizabeth	State NJ	Zip Code 07207	Amount of Each Disbursement this Period																				
Purpose of Disbursement \$250 Contribution		Category/ Type	250.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) B. ELECTION FUND OF ASSEMBLYWOMAN STENDER		Transaction ID: SB29.5625 Date of Disbursement																					
Mailing Address PO Box 146		<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>2</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	2		1	3		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	2		1	3		2	0	0	7														
City Scotch Plains	State NJ	Zip Code 07076	Amount of Each Disbursement this Period																				
Purpose of Disbursement 2 TICKETS		Category/ Type	600.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

Full Name (Last, First, Middle Initial) C. ELECTION FUND OF ASSEMBLYWOMAN STENDER		Transaction ID: SB29.5709 Date of Disbursement																					
Mailing Address PO Box 146		<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td> </tr> </table>		M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	7		2	0	0	7
M	M	/	D	D	/	Y	Y	Y	Y														
0	5		0	7		2	0	0	7														
City Scotch Plains	State NJ	Zip Code 07076	Amount of Each Disbursement this Period																				
Purpose of Disbursement 1 TICKET		Category/ Type	500.00																				
Candidate Name																							
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																							

SUBTOTAL of Disbursements This Page (optional)	▶	1350.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)

A. ELECTION FUND OF ASSEMBLYWOMAN STENDER

Mailing Address PO Box 146

City State Zip Code
Scotch Plains NJ 07076

Purpose of Disbursement
2 TICKETS

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
State: District:

Transaction ID: SB29.5749

Date of Disbursement

06 / 15 / 2007

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. ELECTION FUND OF BARBARA BUONO

Mailing Address 75 Woodbridge Avenue

City State Zip Code
Metuchen NJ 08840

Purpose of Disbursement
2 TICKETS

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
State: NJ District:

Transaction ID: SB29.5764

Date of Disbursement

01 / 15 / 2007

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Election Fund Of Joan Quiqley

Mailing Address 55 Polifly Road
Suite 103, 1st Floor

City State Zip Code
Hackensack NJ 07601

Purpose of Disbursement
1 TICKET

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2007 Primary General Other (specify) ▼
State: District:

Transaction ID: SB29.5689

Date of Disbursement

04 / 23 / 2007

Amount of Each Disbursement this Period

500.00

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Election Fund of John F. Mckeon		Transaction ID: SB29.5626 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 7 Woodhull Avenue		Amount of Each Disbursement this Period 250.00
City West Orange	State NJ	
Zip Code 07052	Purpose of Disbursement 1 TICKET	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Election Fund of John Wisniewski		Transaction ID: SB29.5627 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address 3145 Bordertown Ave, Suite C1		Amount of Each Disbursement this Period 500.00
City Parlin	State NJ	
Zip Code 08859	Purpose of Disbursement 1 TICKET	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Election Fund of John Wisniewski		Transaction ID: SB29.5744 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 3145 Bordertown Ave, Suite C1		Amount of Each Disbursement this Period 1000.00
City Parlin	State NJ	
Zip Code 08859	Purpose of Disbursement 2 TICKETS	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input 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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. ELECTION FUND OF JOSEPH R. MALONE III		Transaction ID: SB29.5718 Date of Disbursement
Mailing Address 15 EAST UNION STREET		<input type="text" value="05"/> / <input type="text" value="18"/> / <input type="text" value="2007"/>
City BORDENTOWN	State NJ	Zip Code 08505
Purpose of Disbursement 2 TICKETS	<input type="text" value="700.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Election Fund of Joseph V. Egan		Transaction ID: SB29.5672 Date of Disbursement
Mailing Address 977 Hoover Drive		<input type="text" value="04"/> / <input type="text" value="09"/> / <input type="text" value="2007"/>
City North Brunswick	State NJ	Zip Code 08902
Purpose of Disbursement 2 TICKETS	<input type="text" value="2000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Election Fund of Neil M. Cohen		Transaction ID: SB29.5612 Date of Disbursement
Mailing Address 161 Virginia Street		<input type="text" value="01"/> / <input type="text" value="23"/> / <input type="text" value="2007"/>
City Hillside	State NJ	Zip Code 07205
Purpose of Disbursement 2 TICKETS	<input type="text" value="1000.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="3700.00"/>
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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Election Fund of Neil M. Cohen		Transaction ID: SB29.5710 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 7 / 2 0 0 7
Mailing Address 161 Virginia Street		Amount of Each Disbursement this Period 1000.00
City Hillside	State NJ	
Zip Code 07205	Purpose of Disbursement 2 TICKETS	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Election Fund of Nia H. Gill		Transaction ID: SB29.5766 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address PO Box 8041		Amount of Each Disbursement this Period 500.00
City Glen Ridge	State NJ	
Zip Code 07028	Purpose of Disbursement 1 TICKET	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. ELECTION FUND OF SCUTARI		Transaction ID: SB29.5673 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 20 Kennedy Drive		Amount of Each Disbursement this Period 1000.00
City Clark	State NJ	
Zip Code 07066	Purpose of Disbursement 2 TICKETS	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
TOTAL This Period (last page this line number only) ▶	

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

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

FOR LINE NUMBER:
(check only one)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. ESSEX COUNTY DEMOCRATIC COMMITTEE		Transaction ID: SB29.5649 Date of Disbursement
Mailing Address 50 PARK PLACE SUITE 1430		<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2007"/>
City NEWARK	State NJ	Zip Code 07102
Purpose of Disbursement 2 TICKETS	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="800.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. ESSEX COUNTY DEMOCRATIC COMMITTEE		Transaction ID: SB29.5711 Date of Disbursement
Mailing Address 50 PARK PLACE SUITE 1430		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
City NEWARK	State NJ	Zip Code 07102
Purpose of Disbursement 2 TICKETS	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="500.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. FRIENDS OF JOAN VOSS		Transaction ID: SB29.5601 Date of Disbursement
Mailing Address PO Box 3172		<input type="text" value="01"/> / <input type="text" value="15"/> / <input type="text" value="2007"/>
City Fort Lee	State NJ	Zip Code 07024
Purpose of Disbursement 2 TICKETS	<input type="text"/>	Amount of Each Disbursement this Period <input type="text" value="1000.00"/>
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="2300.00"/>
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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. JERRY GREEN FOR ASSEMBLY		Transaction ID: SB29.5634 Date of Disbursement
Mailing Address 1460 Prospect Avenue		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
City Plainfield	State NJ	Zip Code 07060
Purpose of Disbursement 1 TICKET	<input type="text" value="500.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Karcher For Senate		Transaction ID: SB29.5770 Date of Disbursement
Mailing Address P.O. Box 98		<input type="text" value="05"/> / <input type="text" value="07"/> / <input type="text" value="2007"/>
City Morganville	State NJ	Zip Code 07751
Purpose of Disbursement 2 TICKETS	<input type="text" value="500.00"/>	
Candidate Name	Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: NJ District: 12		

Full Name (Last, First, Middle Initial) C. Madden For Senate		Transaction ID: SB29.5772 Date of Disbursement
Mailing Address 2240-15 Route 70 W		<input type="text" value="02"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
City Cherry Hill	State NJ	Zip Code 08002
Purpose of Disbursement 1 TICKET	<input type="text" value="500.00"/>	
Candidate Name	Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Madden For Senate		Transaction ID: SB29.5773	
Mailing Address 2240-15 Route 70 W		Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7	
City Cherry Hill	State NJ	Zip Code 08002	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement 2 TICKETS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) B. Morris County Democratic Committee		Transaction ID: SB29.5719	
Mailing Address P.O. Box 306		Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 8 / 2 0 0 7	
City Morristown	State NJ	Zip Code 07963-0306	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement 1 TICKET		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

Full Name (Last, First, Middle Initial) C. NELLIE POU FOR ASSEMBLY		Transaction ID: SB29.5603	
Mailing Address PO Box 2696		Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7	
City Paterson	State NJ	Zip Code 07509	Amount of Each Disbursement this Period 1000.00
Purpose of Disbursement 2 TICKETS		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ District: 35			

SUBTOTAL of Disbursements This Page (optional)	2200.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. NELLIE POU FOR ASSEMBLY		Transaction ID: SB29.5691 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address PO Box 2696		Amount of Each Disbursement this Period 200.00
City Paterson State NJ Zip Code 07509	Purpose of Disbursement 2 TICKET Candidate Name Category/Type	
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 35	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) B. NJ DEMOCRATIC STATE COMMITTEE		Transaction ID: SB29.5604 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 7
Mailing Address 196 WEST STATE STREET		Amount of Each Disbursement this Period 2000.00
City TRENTON State NJ Zip Code 08608	Purpose of Disbursement 2 TICKETS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

Full Name (Last, First, Middle Initial) C. NJ DEMOCRATIC STATE COMMITTEE		Transaction ID: SB29.5776 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 5 / 2 0 0 7
Mailing Address 196 WEST STATE STREET		Amount of Each Disbursement this Period 6000.00
City TRENTON State NJ Zip Code 08608	Purpose of Disbursement 4 TICKETS Candidate Name Category/Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

SUBTOTAL of Disbursements This Page (optional) ►

8200.00

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. OADLINE D. TRUITT FOR ASSEMBLY		Transaction ID: SB29.5720	
Mailing Address P.O. BOX 822		Date of Disbursement MM / DD / YYYY 05 / 18 / 2007	
City Hillside	State NJ	Zip Code 07205	Amount of Each Disbursement this Period 200.00
Purpose of Disbursement CONTRIBUTION		Category/ Type	
Candidate Name			
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: NJ	District: 28		

Full Name (Last, First, Middle Initial) B. Paramus Democratic Organization		Transaction ID: SB29.5778	
Mailing Address 585 MAZUR AVE		Date of Disbursement MM / DD / YYYY 01 / 15 / 2007	
City PARAMUS	State NJ	Zip Code 07652	Amount of Each Disbursement this Period 2000.00
Purpose of Disbursement 4 TICKETS		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

Full Name (Last, First, Middle Initial) C. Paramus Democratic Organization		Transaction ID: SB29.5779	
Mailing Address 585 MAZUR AVE		Date of Disbursement MM / DD / YYYY 04 / 23 / 2007	
City PARAMUS	State NJ	Zip Code 07652	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement 1 PLAYER GOLF OUTING		Category/ Type	
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State:	District:		

SUBTOTAL of Disbursements This Page (optional)	2700.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Plainfield Democratic City Committee		Transaction ID: SB29.5722 Date of Disbursement
Mailing Address 1460 Prospect Ave		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City Plainfield	State NJ	Zip Code 07060
Purpose of Disbursement 2 TICKETS	<input type="text" value="250.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. RE-ELECT MIMS HACKETT JR		Transaction ID: SB29.5606 Date of Disbursement
Mailing Address 155 POLIFLY ROAD SUITE 103, 1ST FLOOR		<input type="text" value="01"/> <input type="text" value="15"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City HACKENSACK	State NJ	Zip Code 07601
Purpose of Disbursement 2 TICKETS	<input type="text" value="600.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Robert T. Bunyon For Matawan Democrats		Transaction ID: SB29.5724 Date of Disbursement
Mailing Address 10 Matawan Green Lane		<input type="text" value="05"/> <input type="text" value="18"/> / <input type="text" value="20"/> <input type="text" value="07"/>
City Matawan	State NJ	Zip Code 07747
Purpose of Disbursement DONATION	<input type="text" value="200.00"/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1050.00"/>
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)

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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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. Senate Democratic Majority		Transaction ID: SB29.5782 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 6 / 2 0 0 7
Mailing Address 194-196 West State Street		Amount of Each Disbursement this Period 2000.00
City State Zip Code Trenton NJ 08608	Purpose of Disbursement 2 TICKETS	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) B. Sweeney, Burzichelli, and Fisher		Transaction ID: SB29.5755 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 5 / 2 0 0 7
Mailing Address 300 North Marion Avenue		Amount of Each Disbursement this Period 2000.00
City State Zip Code Wenonah NJ 08090	Purpose of Disbursement 1 TICKET	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

Full Name (Last, First, Middle Initial) C. Sweeney for Freeholder		Transaction ID: SB29.5683 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 9 / 2 0 0 7
Mailing Address 300 North Marion Ave		Amount of Each Disbursement this Period 2000.00
City State Zip Code Wenonah NJ 08090	Purpose of Disbursement 2 TICKETS	
Candidate Name		Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶	6000.00
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. UNION COUNTY DEMOCRATIC COMMITTEE		Transaction ID: SB29.5614 Date of Disbursement
Mailing Address 65 KING STREET		<input type="text" value="0"/> <input type="text" value="1"/> / <input type="text" value="2"/> <input type="text" value="3"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City HILLSIDE	State NJ	Zip Code 07205
Purpose of Disbursement 2 TICKETS	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="650.00"/>

Full Name (Last, First, Middle Initial) B. UNION COUNTY DEMOCRATIC COMMITTEE		Transaction ID: SB29.5652 Date of Disbursement
Mailing Address 65 KING STREET		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City HILLSIDE	State NJ	Zip Code 07205
Purpose of Disbursement 2 TICKETS	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="600.00"/>

Full Name (Last, First, Middle Initial) C. Upendra Chivukula for Assembly		Transaction ID: SB29.5653 Date of Disbursement
Mailing Address P.O. Box 6463		<input type="text" value="0"/> <input type="text" value="3"/> / <input type="text" value="1"/> <input type="text" value="2"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="7"/> <input type="text" value="7"/>
City Somerset	State NJ	Zip Code 08873-6463
Purpose of Disbursement 2 TICKETS	<input type="text" value=""/>	
Candidate Name	Category/ Type	
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		
		Amount of Each Disbursement this Period <input type="text" value="700.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1950.00"/>
TOTAL This Period (last page this line number only)	<input type="text" value=""/>

**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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial)
A. Upendra Chivukula for Assembly

Transaction ID: SB29.5714

Date of Disbursement

Mailing Address P.O. Box 6463

M	M	/	D	D	/	Y	Y	Y	Y
0	5		0	7		2	0	0	7

City Somerset State NJ Zip Code 08873-6463

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
1 TICKET

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2007
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

53150.00