

# 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  
Communication Workers of America Local 13000

ADDRESS (number and street) 2124 Race Street  
 Check if different than previously reported. (ACC)  
Philadelphia PA 19103

2. **FEC IDENTIFICATION NUMBER** C00109595  
3. IS THIS REPORT  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE-Election** Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post -Election** Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 01 01 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 Mary Beth Gambone

Signature of Treasurer Electronically Filed by Mary Beth Gambone Date 07 03 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  
Communication Workers of America Local 13000

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		145967.87
Y	Y	Y	Y							
2	0	0	7							
(b) Cash on Hand at Beginning of Reporting Period .....	145967.87									
(c) Total Receipts (from Line 19) .....	92836.19	92836.19								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	238804.06	238804.06								
7. Total Disbursements (from Line 31) .....	63859.45	63859.45								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	174944.61	174944.61								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

Federal Election Commission  
999 E street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name  
Communication Workers of America Local 13000

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	1566.00	1566.00
(i) Itemized (use Schedule A) .....	90136.50	90136.50
(ii) Unitemized .....	91702.50	91702.50
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	91702.50	91702.50
12. Transfers From Affiliated/Other Party Committees .....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received .....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1133.69	1133.69
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)) .....	92836.19	92836.19
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	92836.19	92836.19

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	12119.45	12119.45
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	12119.45	12119.45
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	18000.00	18000.00
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.....	33740.00	33740.00
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))..	63859.45	63859.45
32. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30(a)(ii) from Line 31).....	63859.45	63859.45

**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 .....	91702.50	91702.50
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	91702.50	91702.50
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	12119.45	12119.45
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	12119.45	12119.45

**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 6 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

**A.** Full Name (Last, First, Middle Initial)  
Thomas Crawford

Mailing Address 696 Roosevelt Rd

City State Zip Code  
Pittsburgh PA 15237-1031

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

Name of Employer Occupation  
CWA Local 13000

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
01 / 05 / 2007

Transaction ID: 70108.C1898

Amount of Each Receipt this Period  
240.00

Receipt

Payroll Deduction: (40.00- /Pay Period )

**B.** Full Name (Last, First, Middle Initial)  
Mary Beth Gambone

Mailing Address 3837 Hallman Ave

City State Zip Code  
Collegeville PA 19426-1027

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

Name of Employer Occupation  
CWA Local 13000 Board Member

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 240.00

Date of Receipt  
MM / DD / YYYY  
01 / 05 / 2007

Transaction ID: 70108.C1897

Amount of Each Receipt this Period  
240.00

Receipt

Payroll Deduction: (40.00- /Pay Period )

**C.** Full Name (Last, First, Middle Initial)  
Richard Johns

Mailing Address 800 Glenn Street

City State Zip Code  
Washington PA 15301

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

Name of Employer Occupation  
CWA Local 13000 Board Member

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 270.00

Date of Receipt  
MM / DD / YYYY  
01 / 05 / 2007

Transaction ID: 70108.C1896

Amount of Each Receipt this Period  
270.00

Receipt

Payroll Deduction: (45.00- /Pay Period )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<b>750.00</b>
<b>TOTAL</b> 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 7 / 26
	<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b
	<input type="checkbox"/> 13	<input type="checkbox"/> 14
	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 15	<input type="checkbox"/> 16
	<input type="checkbox"/> 17	

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) A. Joseph Kincade		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 1 0 / 2 0 0 7
Mailing Address 326 N. Funk Road		Transaction ID: 70702.C1940
City Boyertown	State PA	Zip Code 19512
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 48.00
Name of Employer Bell Atlantic	Occupation Employee of Bell Atlantic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 48.00	Payroll Deduction: (48.00- /Pay Period )

Full Name (Last, First, Middle Initial) B. Joseph Kincade		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 2 5 / 2 0 0 7
Mailing Address 326 N. Funk Road		Transaction ID: 70702.C1909
City Boyertown	State PA	Zip Code 19512
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 288.00
Name of Employer Bell Atlantic	Occupation Employee of Bell Atlantic	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 336.00	Payroll Deduction: (24.00- /Pay Period )

Full Name (Last, First, Middle Initial) C. Ed Mooney		Date of Receipt M M / D D / Y Y Y Y Y 0 1 / 0 5 / 2 0 0 7
Mailing Address 322 Roseberry Street		Transaction ID: 70108.C1895
City Philadelphia	State PA	Zip Code 19148
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 480.00
Name of Employer CWA Local 13000	Occupation Board Member	Receipt
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 480.00	Payroll Deduction: (80.00- /Pay Period )

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	816.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1566.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) or each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 8 / 26	
	(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 type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

**A.** Full Name (Last, First, Middle Initial)  
Firstrust Bank

Mailing Address 555 E City Ave

City State Zip Code  
Bala Cynwyd PA 19004-1115

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

Name of Employer Occupation

Receipt For:  
 Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼  
1133.69

Date of Receipt  
 M M / D D / Y Y Y Y  
 03 / 30 / 2007

Transaction ID: 70702.C1945

Amount of Each Receipt this Period  
1133.69

Other Receipt

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1133.69
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1133.69



**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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Cwa Local 13000</b>		<b>Transaction ID: 70702.E778</b> Date of Disbursement M M / D D / Y Y Y Y 0 1 / 2 4 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 71.70
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼

Full Name (Last, First, Middle Initial) <b>B. Cwa Local 13000</b>		<b>Transaction ID: 70702.E770</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 85.15
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼

Full Name (Last, First, Middle Initial) <b>C. Cwa Local 13000</b>		<b>Transaction ID: 70702.E774</b> Date of Disbursement M M / D D / Y Y Y Y 0 3 / 1 6 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 313.00
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>469.85</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 26

<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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Cwa Local 13000</b>		<b>Transaction ID: 70702.E780</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 0 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 112.00
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Cwa Local 13000</b>		<b>Transaction ID: 70702.E814</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 303.10
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Cwa Local 13000</b>		<b>Transaction ID: 70702.E831</b> Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 6 / 2 0 0 7
Mailing Address 2124 Race Street		Amount of Each Disbursement this Period 44.44
City Philadelphia State PA Zip Code 19103-	PAC SHIRTS	
Purpose of Disbursement PAC SHIRTS		Category/ Type
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>459.54</b>
<b>TOTAL</b> 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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Image Pointe</b>		<b>Transaction ID:</b> 70702.E766 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 2 / 0 7 / 2 0 0 7
Mailing Address PO Box 657		Amount of Each Disbursement this Period 6668.74
City Waterloo State IA Zip Code 50704-0657	MEMBER SHIRTS	
Purpose of Disbursement MEMBER SHIRTS 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>B. Image Pointe</b>		<b>Transaction ID:</b> 70702.E771 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 1 3 / 2 0 0 7
Mailing Address PO Box 657		Amount of Each Disbursement this Period 1291.40
City Waterloo State IA Zip Code 50704-0657	MEMBER SHIRTS	
Purpose of Disbursement MEMBER SHIRTS 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>C. Internal Revenue</b>		<b>Transaction ID:</b> 70702.E779 <b>Date of Disbursement</b> M M / D D / Y Y Y Y 0 3 / 3 0 / 2 0 0 7
Mailing Address Service Center		Amount of Each Disbursement this Period 952.00
City Ogden State UT Zip Code 84201-0012	1120-POL REPORT	
Purpose of Disbursement 1120-POL REPORT 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	8912.14
<b>TOTAL</b> 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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Internal Revenue</b>		<b>Transaction ID:</b> 70702.E801 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 3 0 / 2 0 0 7
Mailing Address      Service Center		Amount of Each Disbursement this Period 7.92
City Ogden	State      Zip Code UT      84201-0012	
Purpose of Disbursement 1120-POL REPORT		1120-POL REPORT
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Daniel A. Winters &amp; Company</b>		<b>Transaction ID:</b> 70702.E794 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address      Chadds Ford Professional Center Building 200, Suite 205		Amount of Each Disbursement this Period 1220.00
City Chadds Ford	State      Zip Code PA      19317-	
Purpose of Disbursement ACCOUNTING		ACCOUNTING
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<b>1227.92</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>11069.45</b>

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 13 / 26

<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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Citizens for Altmire</b>		Transaction ID: 70702.E834 Date of Disbursement 06 / 29 / 2007	
Mailing Address PO Box 1776		Amount of Each Disbursement this Period 5000.00	
City Freedom State PA Zip Code 15042-0176	Purpose of Disbursement 4TH CONGRESSIONAL DISTRICT	Category/ Type 4TH CONGRESSIONAL DISTRICT	
Candidate Name JASON ALTMIRE	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: PA District: 4			

Full Name (Last, First, Middle Initial) <b>B. Friends of Congressman Holden</b>		Transaction ID: 70702.E832 Date of Disbursement 06 / 29 / 2007	
Mailing Address 18 N. 2nd Steet		Amount of Each Disbursement this Period 5000.00	
City Saint Clair State PA Zip Code 17970-	Purpose of Disbursement 17TH CONGRESSIONAL DISTRICT	Category/ Type 17TH CONGRESSIONAL DISTRICT	
Candidate Name T. TIMOTHY HOLDEN	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: PA District: 17			

Full Name (Last, First, Middle Initial) <b>C. Allyson Schwartz For Congress</b>		Transaction ID: 70702.E768 Date of Disbursement 02 / 13 / 2007	
Mailing Address P.O. Box 586		Amount of Each Disbursement this Period 1000.00	
City Flourtown State PA Zip Code 19031-	Purpose of Disbursement 13TH CONGRESSIONAL DISTRICT	Category/ Type 13TH CONGRESSIONAL DISTRICT	
Candidate Name ALLYSON SCHWARTZ	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: PA District: 13			

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	11000.00
<b>TOTAL</b> 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)

PAGE 14 / 26

<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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Avillo For Congress</b>		Transaction ID: 70702.E765 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 6 / 2 0 0 7	
Mailing Address PO Box 1744		Amount of Each Disbursement this Period -5000.00	
City York State PA Zip Code 17405-1744	Purpose of Disbursement VOIDED CHECK Candidate Name PHILIP J JR AVILLO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 19	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
		VOIDED CHECK	

Full Name (Last, First, Middle Initial) <b>B. Schwartz For Congress</b>		Transaction ID: 70702.E813 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7	
Mailing Address P.O. Box 2232		Amount of Each Disbursement this Period 4000.00	
City Jenkintown State PA Zip Code 19046-	Purpose of Disbursement 13TH CONGRESSIONAL DISTRICT Candidate Name ALLYSON SCHWARTZ Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2007 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
		13TH CONGRESSIONAL DISTRICT	

Full Name (Last, First, Middle Initial) <b>C. Sestak For Congress</b>		Transaction ID: 70702.E835 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 2 9 / 2 0 0 7	
Mailing Address 428 E Baltimore Ave		Amount of Each Disbursement this Period 5000.00	
City Media State PA Zip Code 19063-3840	Purpose of Disbursement 7TH CONGRESSIONAL DISTRICT Candidate Name JOSEPH A JR SESTAK Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 07	Disbursement For: 2007 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/ Type
		7TH CONGRESSIONAL DISTRICT	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> 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)

PAGE 15 / 26

<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)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial)

**A.** Sestak For Congress

Mailing Address 428 E Baltimore Ave

City State Zip Code  
Media PA 19063-3840

Purpose of Disbursement  
7TH CONGRESSIONAL DISTRICT

Candidate Name  
JOSEPH A JR SESTAK

Office Sought:  House  
 Senate  
 President

State: PA District: 07

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: 70702.E833

Date of Disbursement

/   /

Amount of Each Disbursement this Period

7TH CONGRESSIONAL DISTRICT

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

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 16 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Frank Rizzo 07 Committee</b>		<b>Transaction ID: 70702.E793</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 58877		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19102-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL-AT-LARGE		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Forum 2007</b>		<b>Transaction ID: 70702.E790</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address c/o W. Wilson Goode, Jr. 4402 Sherwood Road		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19131-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL-AT-LARGE		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Bob Brady</b>		<b>Transaction ID: 70702.E767</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address P.O. Box 22646		Amount of Each Disbursement this Period 2000.00
City Philadelphia State PA Zip Code 19110-2646	Category/ Type	
Purpose of Disbursement MAYORAL PRIMARY		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	4000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....



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

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

FOR LINE NUMBER:  
(check only one)

PAGE 17 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Friends of Bob Brady</b>		<b>Transaction ID: 70702.E811</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 4 / 2 0 0 7
Mailing Address P.O. Box 22646		Amount of Each Disbursement this Period 3000.00
City Philadelphia State PA Zip Code 19110-2646	Purpose of Disbursement MAYORAL PRIMARY 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>B. Committee to Elect Bob Mulgrew</b>		<b>Transaction ID: 70702.E803</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1935 South Galloway Street		Amount of Each Disbursement this Period 500.00
City Philadelphia State PA Zip Code 19148-	Purpose of Disbursement PHILA. MUNICIPAL COURT JUDGE 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>C. Friends of Carol Ann Campbell</b>		<b>Transaction ID: 70702.E809</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 28915		Amount of Each Disbursement this Period 2500.00
City Philadelphia State PA Zip Code 19151-	Purpose of Disbursement PHILA. DISTRICT COUNCIL 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) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	6000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 18 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Anna Verna Committee</b>		<b>Transaction ID: 70702.E792</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 3106 Carpi Drive		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19145-	Purpose of Disbursement PHILADELPHIA CITY COUNCIL	
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>B. Kenney for Council</b>		<b>Transaction ID: 70702.E769</b> Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 3 / 2 0 0 7
Mailing Address P.O. Box 60065		Amount of Each Disbursement this Period 2000.00
City Philadelphia State PA Zip Code 19107-	Purpose of Disbursement COUNCILMAN AT-LARGE	
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>C. Chester County Council, AFL-CIO</b>		<b>Transaction ID: 70702.E781</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 3 / 2 0 0 7
Mailing Address 750 Charles St		Amount of Each Disbursement this Period 200.00
City Coatesville State PA Zip Code 19320-2917	Purpose of Disbursement ANNUAL BANQUET	
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>3200.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 19 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Greenlee for Council-At-Large</b>		<b>Transaction ID: 70702.E789</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 2932 Ogden Street		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19130-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL-AT-LARGE		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Darrell L. Clarke</b>		<b>Transaction ID: 70702.E783</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 58235		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19102-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Donna Reed Miller</b>		<b>Transaction ID: 70702.E786</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address 5845 Germantown Avenue		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19144-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 20 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

<p><b>A. Committee to Elect a Majority</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address 1651 Covington Road</p> <p>City Morrisville State PA Zip Code 19067</p> <p>Purpose of Disbursement BUCKS COUNTY COMMISSIONER</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> 70702.E810 <b>Date of Disbursement:</b> 05 / 10 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>B. Kenney For Council</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 60065</p> <p>City Philadelphia State PA Zip Code 19102</p> <p>Purpose of Disbursement PHILADELPHIA CITY COUNCIL-AT-LARGE</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> 70702.E788 <b>Date of Disbursement:</b> 04 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>C. Savage For Council</b></p> <p>Full Name (Last, First, Middle Initial) Mailing Address P.O. Box 21999</p> <p>City Philadelphia State PA Zip Code 19124</p> <p>Purpose of Disbursement PHILADELPHIA CITY COUNCIL</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p>		<p><b>Transaction ID:</b> 70702.E785 <b>Date of Disbursement:</b> 04 / 17 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>		<p>Category/Type</p>

<p><b>SUBTOTAL</b> of Disbursements This Page (optional) .....</p>	<p>4500.00</p>
<p><b>TOTAL</b> This Period (last page this line number only) .....</p>	

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 21 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Joe ONeill For Judge</b>		<b>Transaction ID: 70702.E804</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 123 South Board Street, 24th Floor		Amount of Each Disbursement this Period 500.00
City Philadelphia State PA Zip Code 19109-	Category/ Type	
Purpose of Disbursement PHILA. MUNICIPAL COURT JUDGE		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Committee to Elect Harlan Shober</b>		<b>Transaction ID: 70702.E796</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7
Mailing Address P.O. Box 2		Amount of Each Disbursement this Period 200.00
City Meadow Lands State PA Zip Code 15347-	Category/ Type	
Purpose of Disbursement WASHINGTON CTY. COMMISSIONER		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Jack Kelly</b>		<b>Transaction ID: 70702.E802</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address P.O. Box 59354		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19102-	Category/ Type	
Purpose of Disbursement PHILADELPHIA COUNCIL AT-LARGE		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 22 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Friends of Joan Krajewski</b>		<b>Transaction ID: 70702.E784</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address 4724 Convent Lane		Amount of Each Disbursement this Period 1000.00	
City Philadelphia State PA Zip Code 19114-	Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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>B. Committee to Elect Joe Manning</b>		<b>Transaction ID: 70702.E797</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 3 / 2 0 0 7	
Mailing Address 630 Duncan Avenue		Amount of Each Disbursement this Period 200.00	
City Washington State PA Zip Code 15301-	Purpose of Disbursement WASHINGTON CTY. COMMISSIONER		
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>C. Friends of Juan F. Ramos</b>		<b>Transaction ID: 70702.E791</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7	
Mailing Address P.O. Box 58354		Amount of Each Disbursement this Period 1000.00	
City Philadelphia State PA Zip Code 19102-	Purpose of Disbursement PHILADELPHIA CITY COUNCIL-AT-LARGE		
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) ▼		

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	2200.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 23 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Committee to Elect Judge Jimmy Lynn</b>		<b>Transaction ID: 70702.E806</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 925 Harvest Drive P.O. Box 3010		Amount of Each Disbursement this Period 500.00
City Blue Bell State PA Zip Code 19422-3010		
Purpose of Disbursement PA SUPERIOR COURT JUDGE 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>B. Debra Todd For Justice Committee</b>		<b>Transaction ID: 70702.E808</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 0 / 2 0 0 7
Mailing Address 1700 E. Carson Street, 3rd Floor		Amount of Each Disbursement this Period 1000.00
City Pittsburgh State PA Zip Code 15203-		
Purpose of Disbursement PA SUPREME COURT JUDGE 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>C. Committee to Reelect Ken Westcott</b>		<b>Transaction ID: 70702.E798</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 5 / 2 0 0 7
Mailing Address 395 Leonard Avenue		Amount of Each Disbursement this Period 200.00
City Washington State PA Zip Code 15301-		
Purpose of Disbursement MAYORAL CANDIDATE 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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	1700.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	[ ]

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 24 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. Allegheny Cnty Labor Council</b>		<b>Transaction ID: 70702.E812</b> Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 9 / 2 0 0 7
Mailing Address 401 Wood Street Suite 501		Amount of Each Disbursement this Period 340.00
City Pittsburgh State PA Zip Code 15222-	Category/ Type	
Purpose of Disbursement FUNDRAISER		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Marian B. Tasco</b>		<b>Transaction ID: 70702.E787</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 27454		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19188-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Neighbors United to Reelect F. DiCicc</b>		<b>Transaction ID: 70702.E782</b> Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 7 / 2 0 0 7
Mailing Address P.O. Box 36626		Amount of Each Disbursement this Period 2500.00
City Philadelphia State PA Zip Code 19107-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3840.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	



# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 25 / 26

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

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NAME OF COMMITTEE (In Full)  
Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial) <b>A. The Committee to Reelect Keith McCall</b>		<b>Transaction ID: 70702.E772</b> Date of Disbursement M M / D D / Y Y Y Y 03 / 07 / 2007
Mailing Address P.O. Box 244		Amount of Each Disbursement this Period 1000.00
City Lansford State PA Zip Code 18232-	Category/ Type	
Purpose of Disbursement MAJORITY WHIP 122 LEG. DISTRICT		
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) ▼	

Full Name (Last, First, Middle Initial) <b>B. Friends of Blondell Reynolds Brown</b>		<b>Transaction ID: 70702.E795</b> Date of Disbursement M M / D D / Y Y Y Y 04 / 17 / 2007
Mailing Address P.O. Box 8386		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19101-	Category/ Type	
Purpose of Disbursement PHILADELPHIA CITY COUNCIL		
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) ▼	

Full Name (Last, First, Middle Initial) <b>C. Friends of Seamus McCaffery</b>		<b>Transaction ID: 70702.E807</b> Date of Disbursement M M / D D / Y Y Y Y 05 / 10 / 2007
Mailing Address P.O. Box 6196		Amount of Each Disbursement this Period 1000.00
City Philadelphia State PA Zip Code 19116-	Category/ Type	
Purpose of Disbursement PA SUPREME COURT JUDGE		
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) ▼	

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	3000.00
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	.....

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

PAGE 26 / 26

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

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NAME OF COMMITTEE (In Full)

Communication Workers of America Local 13000

Full Name (Last, First, Middle Initial)

**A.** Committee to Elect Sean Kennedy

Mailing Address 248 Rector Street

City Philadelphia State PA Zip Code 19128-

Purpose of Disbursement  
PHILA. MUNICIPAL COURT JUDGE

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: 70702.E805

Date of Disbursement

05 / 10 / 2007

Amount of Each Disbursement this Period

500.00

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

500.00

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

33640.00