

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 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 C 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 (X), Termination Report (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31 (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special (d) 30-Day POST-Election Report for the: General, Runoff, Special

5. Covering Period 01 / 01 / 2015 through 06 / 30 / 2015

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 ROBERT SHERLOCK

Signature of Treasurer ROBERT SHERLOCK [Electronically Filed] Date 07 / 14 / 2015

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**

FEC Form 3X (Rev. 02/2003)

Write or Type Committee Name

STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Report Covering the Period: From: / / To: / /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2015"/>		<input type="text" value="117367.76"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="117367.76"/>	
(c) Total Receipts (from Line 19)	<input type="text" value="64147.52"/>	<input type="text" value="64147.52"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="181515.28"/>	<input type="text" value="181515.28"/>
7. Total Disbursements (from Line 31).....	<input type="text" value="94471.34"/>	<input type="text" value="94471.34"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="87043.94"/>	<input type="text" value="87043.94"/>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="0.00"/>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	<input type="text" value="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: 01 / 01 / 2015 To: 06 / 30 / 2015

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	64121.49	64121.49
(ii) Unitemized	26.03	26.03
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	64147.52	64147.52
(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)	64147.52	64147.52
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (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))..... ▶	64147.52	64147.52
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	64147.52	64147.52

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated 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	65171.34	65171.34
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	65171.34	65171.34
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1000.00	1000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (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	28300.00	28300.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	94471.34	94471.34
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	94471.34	94471.34

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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)	64147.52	64147.52
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	64147.52	64147.52
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	65171.34	65171.34
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	65171.34	65171.34

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 6 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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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. STEAMFITTERS LOCAL 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 Mount Bethel Rd
 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 ▼
 224.00

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2015
Transaction ID : SA11AI.7190
 Amount of Each Receipt this Period
 224.00
 PAC FUND DUES

B. STEAMFITTERS LOCAL 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 Mount Bethel Rd
 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 ▼
 2248.23

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 06 / 2015
Transaction ID : SA11AI.7191
 Amount of Each Receipt this Period
 2024.23
 PAC FUND DUES

C. STEAMFITTERS LOCAL 475
 Full Name (Last, First, Middle Initial)
 Mailing Address 136 Mount Bethel Rd
 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 ▼
 2865.73

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 01 / 07 / 2015
Transaction ID : SA11AI.7192
 Amount of Each Receipt this Period
 617.50
 PAC FUND DUES

SUBTOTAL of Receipts This Page (optional).....▶	2865.73
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`#19A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7190

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule: SA11AI

Transaction ID: SA11AI.7191

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7192

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 9 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

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

A. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
24485.44

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 02 / 06 / 2015

Transaction ID : SA11AI.7208

Amount of Each Receipt this Period
21619.71

PAC FUND DUES

B. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
26490.60

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 16 / 2015

Transaction ID : SA11AI.7215

Amount of Each Receipt this Period
2005.16

PAC FUND DUES

C. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
27108.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 24 / 2015

Transaction ID : SA11AI.7216

Amount of Each Receipt this Period
617.50

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional).....▶	24242.37
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7208

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule: SA11AI

Transaction ID: SA11AI.7215

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7216

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 12 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
27300.10

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 03 / 26 / 2015
Transaction ID : SA11AI.7217

Amount of Each Receipt this Period
192.00

PAC FUND DUES

B. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
44261.92

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 02 / 2015
Transaction ID : SA11AI.7238

Amount of Each Receipt this Period
16961.82

PAC FUND DUES

C. STEAMFITTERS LOCAL 475

Full Name (Last, First, Middle Initial)
Mailing Address 136 Mount Bethel Rd
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 ▼
46309.58

Date of Receipt
 M M M / D D D / Y Y Y Y Y Y
 04 / 06 / 2015
Transaction ID : SA11AI.7239

Amount of Each Receipt this Period
2047.66

PAC FUND DUES

SUBTOTAL of Receipts This Page (optional).....▶	19201.48
TOTAL This Period (last page this line number only).....▶	

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`-H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7217

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule: SA11AI

Transaction ID: SA11AI.7238

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7239

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule:

Transaction ID:

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)	PAGE 15 OF 39
	<input checked="" type="checkbox"/> 11a <input type="checkbox"/> 13	<input type="checkbox"/> 11b <input type="checkbox"/> 14

<input type="checkbox"/> 12	<input type="checkbox"/> 16	<input type="checkbox"/> 17
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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

Full Name (Last, First, Middle Initial) A. STEAMFITTERS LOCAL 475		Date of Receipt
Mailing Address 136 Mount Bethel Rd PO Box 4187		<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2015"/>
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.7266
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="14850.23"/>
	<input type="text" value="61159.81"/>	PAC FUND DUES

Full Name (Last, First, Middle Initial) B. STEAMFITTERS LOCAL 475		Date of Receipt
Mailing Address 136 Mount Bethel Rd PO Box 4187		<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2015"/>
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.7281
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="2136.18"/>
	<input type="text" value="63295.99"/>	PAC FUND DUES

Full Name (Last, First, Middle Initial) C. STEAMFITTERS LOCAL 475		Date of Receipt
Mailing Address 136 Mount Bethel Rd PO Box 4187		<input type="text" value="06"/> / <input type="text" value="30"/> / <input type="text" value="2015"/>
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee.	<input type="text" value="C"/>	Transaction ID : SA11AI.7282
Name of Employer	Occupation	Amount of Each Receipt this Period
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼	<input type="text" value="825.50"/>
	<input type="text" value="64121.49"/>	PAC FUND DUES

SUBTOTAL of Receipts This Page (optional).....▶	<input type="text" value="17811.91"/>
TOTAL This Period (last page this line number only).....▶	<input type="text" value="64121.49"/>

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFH`G7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: SA11AI

Transaction ID : SA11AI.7266

This item is unitemized because it is contributions from various individuals in which none of those individuals exceed \$200.

Form/Schedule:

Transaction ID:

**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. Caesars Atlantic City

Mailing Address PO Box 389

City Atlantic City State NJ Zip Code 08401

Purpose of Disbursement
AFL-CIO CONFERENCE - 5 ROOMS/2 NIGHTS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 08 / 2015

Transaction ID : SB21B.7255

Amount of Each Disbursement this Period

1696.00

Full Name (Last, First, Middle Initial)

B. James Caffrey

Mailing Address 271 Grove Ave

City Woodbridge State NJ Zip Code 07095

Purpose of Disbursement
NORTH AMERICAN BUILDING TRADES LEGISLATIVE CONF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2015

Transaction ID : SB21B.7245

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. Dennis Dengel

Mailing Address 541 Laurel Wood Ct

City Howell State NJ Zip Code 07731

Purpose of Disbursement
NJ STATE AFL-CIO CONFERENCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.7284

Amount of Each Disbursement this Period

450.00

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

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

2746.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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. Edward Fraass Jr.

Mailing Address 6 Mill Lane

City Dayton State NJ Zip Code 08810

Purpose of Disbursement
NORTH AMERICAN BUILDING TRADES LEGISLATIVE CONF

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		07		2015

Transaction ID : SB21B.7244

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. Edward Fraass Jr.

Mailing Address 6 Mill Lane

City Dayton State NJ Zip Code 08810

Purpose of Disbursement
NJ STATE AFL-CIO CONFERENCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2015

Transaction ID : SB21B.7285

Amount of Each Disbursement this Period

450.00

Full Name (Last, First, Middle Initial)

C. Timothy Fraass

Mailing Address 386 Conover Street

City South Amboy State NJ Zip Code 08879

Purpose of Disbursement
NJ STATE AFL-CIO CONFERENCE

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		05		2015

Transaction ID : SB21B.7288

Amount of Each Disbursement this Period

450.00

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

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

<input 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. ROBERT T. HIGGINS

Mailing Address 35 Sand Bar Drive

City Bayville State NJ Zip Code 08721

Purpose of Disbursement
NORTH AMERICAN BUILDING TRADES LEGISLATIVE CONF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2015

Transaction ID : SB21B.7248

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

B. MICHAEL R. HOLSWORTH

Mailing Address 14 BIRCH TERRACE

City PARLIN State NJ Zip Code 08859

Purpose of Disbursement
NORTH AMERICAN BUILDING TRADES LEGISLATIVE CONF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
04 / 07 / 2015

Transaction ID : SB21B.7246

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. MACPAC

Mailing Address 1502 South Olden Ave

City Trenton State NJ Zip Code 08610

Purpose of Disbursement
2015 PER CAPITA FEE PAID

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

MM / DD / YYYY
01 / 06 / 2015

Transaction ID : SB21B.7197

Amount of Each Disbursement this Period

5200.00

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

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

6400.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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. MSPC

Mailing Address 340 North Ave

City Cranford State NJ Zip Code 07016

Purpose of Disbursement
4th Qtr Accounting Fee

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 01 / 2015

Transaction ID : SB21B.7241

Amount of Each Disbursement this Period

270.00

Full Name (Last, First, Middle Initial)

B. NJ STATE AFL-CIO

Mailing Address 106 WEST STATE STREET

City TRENTON State NJ Zip Code 08608

Purpose of Disbursement
1Q AND 2Q 2015 PER CAPITA FEES PAID

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 13 / 2015

Transaction ID : SB21B.7198

Amount of Each Disbursement this Period

700.00

Full Name (Last, First, Middle Initial)

C. NJ STATE AFL-CIO

Mailing Address 106 WEST STATE STREET

City TRENTON State NJ Zip Code 08608

Purpose of Disbursement
5 REGISTRATIONS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : SB21B.7259

Amount of Each Disbursement this Period

1500.00

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

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

2470.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		06		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7193

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

2808.66

Purpose of Disbursement
CONTRIBUTIONS PAID - 140433 HOURS FOR DECEMBER 2014

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

B. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02		03		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7212

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

2161.96

Purpose of Disbursement
CONTRIBUTIONS PAID - 108098 HOURS FOR JANUARY 2015

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Full Name (Last, First, Middle Initial)

C. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		10		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7221

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

1593.72

Purpose of Disbursement
CONTRIBUTIONS PAID - 79686 HOURS FOR FEBRUARY 2015

Category/ Type

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

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

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

6564.34

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04		01		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7242

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

1696.16

Purpose of Disbursement
CONTRIBUTIONS PAID - 84808 HOURS FOR MARCH 2015

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		12		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7267

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

1485.02

Purpose of Disbursement
CONTRIBUTIONS PAID - 74251 HOURS FOR APRIL 2015

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06		09		2015

Mailing Address P.O. BOX 73

Transaction ID : SB21B.7289

City WINDSLOW State NJ Zip Code 08095

Amount of Each Disbursement this Period

1567.18

Purpose of Disbursement
CONTRIBUTIONS PAID - 78359 HOURS FOR MAY 2015

--

Candidate Name

Category/Type

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: District:

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

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

4748.36

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

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

FOR LINE NUMBER:
(check only one)

<input 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. NORTH AMERICA'S BUILDING TRADES UNIONS

Mailing Address 815 16TH STREET, NW
SUITE 600

City WASHINGTON State DC Zip Code 20006

Purpose of Disbursement
5 REGISTRATIONS LEGISLATIVE CONFERENCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB21B.7209

Amount of Each Disbursement this Period

875.00

Full Name (Last, First, Middle Initial)

B. ROBERT SHERLOCK

Mailing Address 14 LAKEVIEW DRIVE

City HELMETTA State NJ Zip Code 08828

Purpose of Disbursement
NORTH AMERICAN BUILDING TRADES LEGISLATIVE CONF

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
04	/	07	/	2015

Transaction ID : SB21B.7247

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. ROBERT SHERLOCK

Mailing Address 14 LAKEVIEW DRIVE

City HELMETTA State NJ Zip Code 08828

Purpose of Disbursement
NJ STATE AFL-CIO CONFERENCE

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
06	/	05	/	2015

Transaction ID : SB21B.7286

Amount of Each Disbursement this Period

450.00

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

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

1925.00

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

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

FOR LINE NUMBER:
(check only one)

<input 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 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

Purpose of Disbursement REIMBURSE PAYROLL NORTH AMERICAN BUILDING TRADES CONF

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
04 / 13 / 2015

Transaction ID : SB21B.7264

Amount of Each Disbursement this Period

2926.88

Full Name (Last, First, Middle Initial)

B. STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

Purpose of Disbursement REIMBURSE PAYROLL NJ STATE AFL-CIO LEGISLATIVE CONFERENCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 09 / 2015

Transaction ID : SB21B.7290

Amount of Each Disbursement this Period

2882.36

Full Name (Last, First, Middle Initial)

C. Shaun Sullivan

Mailing Address 88 OAK GLENN ROAD

City TOMS RIVER State NJ Zip Code 08753

Purpose of Disbursement NJ STATE AFL-CIO CONFERENCE

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Category/Type

Date of Disbursement

MM / DD / YYYY
06 / 05 / 2015

Transaction ID : SB21B.7287

Amount of Each Disbursement this Period

450.00

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

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

6259.24

**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. The Beacon Hotel

Mailing Address 1615 Rhode Island Ave, NW

City Washington State DC Zip Code 20036

Purpose of Disbursement
(5) 3 NIGHT HOTEL RESERVATIONS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	02	/	2015

Transaction ID : SB21B.7211

Amount of Each Disbursement this Period

4276.65

Full Name (Last, First, Middle Initial)

B. U.A. POLITICAL EDUCATION FUND

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 140433 HOURS FOR DECEMBER 2014

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	06	/	2015

Transaction ID : SB21B.7194

Amount of Each Disbursement this Period

7021.65

Full Name (Last, First, Middle Initial)

C. U.A. POLITICAL EDUCATION FUND

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 108098 HOURS FOR JANUARY 2015

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
02	/	03	/	2015

Transaction ID : SB21B.7298

Amount of Each Disbursement this Period

5404.90

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

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

16703.20

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

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

FOR LINE NUMBER:
(check only one)

<input 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

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 79686 HOURS FOR FEBRUARY 2015

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
03 / 10 / 2015

Transaction ID : **SB21B.7222**

Amount of Each Disbursement this Period

3984.30

Category/
Type

Full Name (Last, First, Middle Initial)

B. U.A. POLITICAL EDUCATION FUND

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 84808 HOURS FOR MARCH 2015

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
04 / 01 / 2015

Transaction ID : **SB21B.7243**

Amount of Each Disbursement this Period

4240.40

Category/
Type

Full Name (Last, First, Middle Initial)

C. U.A. POLITICAL EDUCATION FUND

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 74251 HOURS FOR APRIL 2015

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: Primary General Other (specify) ▼

Date of Disbursement

MM / DD / YYYY
05 / 12 / 2015

Transaction ID : **SB21B.7268**

Amount of Each Disbursement this Period

3712.55

Category/
Type

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

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

11937.25

**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. U.A. POLITICAL EDUCATION FUND

Mailing Address THREE PARK PLACE

City ANNAPOLIS State MD Zip Code 21401

Purpose of Disbursement
CONTRIBUTIONS PAID - 78359 HOURS FOR MAY 2015

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y
0	6		0	9		2	0	1	5		

Transaction ID : SB21B.7291

Amount of Each Disbursement this Period

3	9	1	.	9	5
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Category/
Type

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

--	--	--	--	--	--

Category/
Type

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President

State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y	Y	Y

Amount of Each Disbursement this Period

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Category/
Type

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

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

3	9	1	.	9	5
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6	5	1	7	1	.	3	4
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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**

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

FOR LINE NUMBER:
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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. PASCRELL FOR CONGRESS

Mailing Address PO BOX 100

City TEANECK State NJ Zip Code 07666

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y
01 / 29 / 2015

Transaction ID : SB23.7206

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For:
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M / D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

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

1000.00

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. BARNES FOR SENATE FUND

Mailing Address 25 GARDEN WAY

City HOWELL State NJ Zip Code 07731

Purpose of Disbursement
CONTRIBUTION - 2 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : SB29.7249

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. BLOOMFIELD DEMOCRATIC COMMITTEE

Mailing Address 29 STONE STREET

City BLOOMFIELD State NJ Zip Code 07003

Purpose of Disbursement
CONTRIBUTIONS - 2 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
04 / 08 / 2015

Transaction ID : SB29.7253

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT M. TERESA RUIZ

Mailing Address 45 ESSEX STREET

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
CONTRIBUTION - 2 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.7223

Amount of Each Disbursement this Period

600.00

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

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

1700.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT M. TERESA RUIZ

Mailing Address 45 ESSEX STREET

City Hackensack State NJ Zip Code 07601

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SB29.7292

Amount of Each Disbursement this Period

600.00

Category/
Type

Full Name (Last, First, Middle Initial)

B. COMMITTEE TO ELECT PATRICK DIEGNAN JR

Mailing Address P.O. BOX 736

City SOUTH PLAINFIELD State NJ Zip Code 07080

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.7224

Amount of Each Disbursement this Period

750.00

Category/
Type

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT SHEILA OLIVER

Mailing Address 45 ESSEX STREET
SUITE 204

City HACKENSACK State NJ Zip Code 07601

Purpose of Disbursement
CONTRIBUTIONS - 4 TICKETS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.7227

Amount of Each Disbursement this Period

1000.00

Category/
Type

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

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

2350.00

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO ELECT SHEILA OLIVER

Mailing Address 45 ESSEX STREET
SUITE 204

City HACKENSACK State NJ Zip Code 07601

Purpose of Disbursement
INSIDE BACK COVER AD

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.7256**

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

B. DANIELSEN FOR ASSEMBLY

Mailing Address 45 ESSEX STREET
SUITE 204

City HACKENSACK State NJ Zip Code 07601

Purpose of Disbursement
CONTRIBUTION - 1 TICKET

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.7269**

Amount of Each Disbursement this Period

Category/
Type

Full Name (Last, First, Middle Initial)

C. DEANGELO FOR ASSEMBLY

Mailing Address 105 LIMWOOD DRIVE

City HAMILTON State NJ Zip Code 08690

Purpose of Disbursement
CONTRIBUTION - 5 TICKETS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

/ /

Transaction ID : **SB29.7293**

Amount of Each Disbursement this Period

Category/
Type

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)

<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. Democratic Assembly Campaign Committee

Mailing Address P.O. Box 3712

City State Zip Code
Trenton NJ 08629

Purpose of Disbursement
CONTRIBUTIONS - 2 TICKETS

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Transaction ID : **SB29.7229**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

B. ELECTION FUND OF ANNETTE QUIJANO

Mailing Address 311 W. HENRY STREET

City State Zip Code
LINDEN NJ 07036

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
01	/	29	/	2015

Transaction ID : **SB29.7200**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. ELECTION FUND OF BRENDAN GIL

Mailing Address 45 ESSEX STREET
SUITE 108 - 1ST FLOOR

City State Zip Code
HACKENSACK NJ 07601

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Transaction ID : **SB29.7271**

Amount of Each Disbursement this Period

250.00

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

3750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Election Fund of John Wisniewski

Mailing Address 132 MAIN STREET
SUITE C

City SAYREVILLE State NJ Zip Code 08872

Purpose of Disbursement
CONTRIBUTION - 2 TICKETS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
06 / 11 / 2015

Transaction ID : SB29.7294

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Election Fund of Luis Quintana

Mailing Address PO Box 867

City Newark State NJ Zip Code 07101

Purpose of Disbursement
CONTRIBUTION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
01 / 28 / 2015

Transaction ID : SB29.7199

Amount of Each Disbursement this Period

300.00

Full Name (Last, First, Middle Initial)

C. Election Fund of Luis Quintana

Mailing Address PO Box 867

City Newark State NJ Zip Code 07101

Purpose of Disbursement
CONTRIBUTION - INSIDE COVER AD AND 2 TICKETS

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
03 / 19 / 2015

Transaction ID : SB29.7230

Amount of Each Disbursement this Period

550.00

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

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

1850.00

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

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

FOR LINE NUMBER:
(check only one)

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

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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 Nia H. Gill

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03	/	19	/	2015

Mailing Address 201 Railroad Ave
#306

Transaction ID : SB29.7231

City East Rutherford State NJ Zip Code 07073

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. Election Fund of Raymond J. Lesniak

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
06	/	11	/	2015

Mailing Address P.O. BOX 1964

Transaction ID : SB29.7296

City Brick State NJ Zip Code 08723

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
CONTRIBUTION - 4 TICKETS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. Election Fund of Thomas P. Giblin Inc.

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05	/	14	/	2015

Mailing Address P.O. Box 43062

Transaction ID : SB29.7272

City Upper Montclair State NJ Zip Code 07043

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: NJ District: 34

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

4000.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. ESSEX COUNTY DEMOCRATIC COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01		29		2015

Mailing Address 50 PARK PLACE
SUITE 1430

Transaction ID : SB29.7202

City NEWARK State NJ Zip Code 07102

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. ESSEX COUNTY DEMOCRATIC COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03		19		2015

Mailing Address 50 PARK PLACE
SUITE 1430

Transaction ID : SB29.7232

City NEWARK State NJ Zip Code 07102

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTIONS - 2 TICKETS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. ESSEX COUNTY DEMOCRATIC COMMITTEE

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05		14		2015

Mailing Address 50 PARK PLACE
SUITE 1430

Transaction ID : SB29.7273

City NEWARK State NJ Zip Code 07102

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
CONTRIBUTIONS - 2 TICKETS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

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

1350.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BENJIE E. WIMBERLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2015

Mailing Address 45 ESSEX STREET
SUITE 204 - 2ND FLOOR

Transaction ID : SB29.7274

City HACKENSACK State NJ Zip Code 07601

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
CONTRIBUTION - 2 TICKETS

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

B. HOLLEY FOR ASSEMBLY

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		14		2015

Mailing Address 45 ESSEX STREET
SUITE 204 - 2ND FLOOR

Transaction ID : SB29.7276

City HACKENSACK State NJ Zip Code 07601

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
DONATION

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

C. JOE CRYAN FOR SHERIFF

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
03		19		2015

Mailing Address 722 GREENWOOD ROAD SOUTH

Transaction ID : SB29.7233

City UNION State NJ Zip Code 07083

Amount of Each Disbursement this Period

500.00

Purpose of Disbursement
SPONSOR

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2015
 Primary General
 Other (specify) ▼

State: District:

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

1500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. LUKAC FOR MAYOR 2015

Mailing Address 825 BOUND BROOK AVENUE

City MANVILLE State NJ Zip Code 08835

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
01	/	29	/	2015

Transaction ID : SB29.7205

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. MCANJ - PAC

Mailing Address P.O. Box 390

City Springfield State NJ Zip Code 07081

Purpose of Disbursement
DINNER SPONSOR

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
05	/	26	/	2015

Transaction ID : SB29.7280

Amount of Each Disbursement this Period

1250.00

Full Name (Last, First, Middle Initial)

C. Morris County Democratic Committee

Mailing Address P.O. Box 306

City Morristown State NJ Zip Code 07963-0306

Purpose of Disbursement
BREAKFAST SPONSOR

Candidate Name

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
03	/	19	/	2015

Transaction ID : SB29.7235

Amount of Each Disbursement this Period

500.00

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

2750.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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

Full Name (Last, First, Middle Initial)

A. Steve Sweeney for Senate

Mailing Address 300 Marion Ave

City Wenonah State NJ Zip Code 08090

Purpose of Disbursement
CONTRIBUTION - 2 TICKETS

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.7297

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

B. SULLIVAN FOR FREEHOLDER

Mailing Address 204 HILLSIDE AVENUE

City WYCKOFF State NJ Zip Code 07481

Purpose of Disbursement
DONATION

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2015
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.7278

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

C. VENEZIA FOR BLOOMFIELD 2016

Mailing Address 71 WASHINGTON STREET

City BLOOMFIELD State NJ Zip Code 07006

Purpose of Disbursement
CONTRIBUTION - FRIEND SPONSOR

Candidate Name

Office Sought: House Senate President
State: District:

Disbursement For: 2016
 Primary General
 Other (specify) ▼

Category/
Type

Date of Disbursement

/ /

Transaction ID : SB29.7260

Amount of Each Disbursement this Period

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

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

