

**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

PLUMBERS PIPEFITTERS &amp; M E S LOCAL UNION 392 PAC

ADDRESS (number and street)

1228 CENTRAL PARKWAY

☐Check if different  
than previously  
reported. (ACC)

CINCINNATI

OH

45210

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00242024

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

04

01

2008

through

06

30

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Thomas Sullivan

Signature of Treasurer

Electronically Filed by Thomas Sullivan

Date

07

14

2008

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

Office  
Use  
Only**FEC FORM 3X**  
(Rev. 12/2004)

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PLUMBERS PIPEFITTERS &amp; M E S LOCAL UNION 392 PAC

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 4 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 6 | 3 | 0 | 2 | 0 | 0 | 8 |

|  | COLUMN A<br>This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------|-----------------------------------|
| 6. (a) Cash on Hand<br>January 1 <span>2008</span>   |                         | 47087.46                          |
| (b) Cash on Hand at<br>Beginning of Reporting Period .....   | 57653.39                |                                   |
| (c) Total Receipts (from Line 19) .....  | 35935.57                | 64822.23                          |
| (d) Subtotal (add lines 6(b) and<br>6(c) for Column A and Lines<br>6(a) and 6(c) for Column B) .....             | 93588.96                | 111909.69                         |
| 7. Total Disbursements (from Line 31) .....  | 28052.88                | 46373.61                          |
| 8. Cash on Hand at Close of<br>Reporting Period<br>(subtract Line 7 from Line 6(d)) .....                        | 65536.08                | 65536.08                          |
| 9. Debts and Obligations owed <b>TO</b><br>the committee (Itemize all on<br>Schedule C and/or Schedule D) .....  | 0.00                    |                                   |
| 10. Debts and Obligations owed <b>BY</b><br>the committee (Itemize all on<br>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**

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

PLUMBERS PIPEFITTERS &amp; M E S LOCAL UNION 392 PAC

Report Covering the Period:

From:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 4 | 0 | 1 | 2 | 0 | 0 | 8 |

To:

|   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|
| M | M | D | D | Y | Y | Y | Y |
| 0 | 6 | 3 | 0 | 2 | 0 | 0 | 8 |

| I. Receipts  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 11. Contributions (other than loans) From:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees  | 0.00                          | 0.00                              |
| (i) Itemized (use Schedule A) .....  |                               |                                   |
| (ii) Unitemized .....  | 30759.08                      | 59642.91                          |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➡   | 30759.08                      | 59642.91                          |
| (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) ..... ➡  | 30759.08                      | 59642.91                          |
| 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 .....           | 5175.00                       | 5175.00                           |
| 17. Other Federal Receipts (Dividends, Interest, etc.) .....   | 1.49                          | 4.32                              |
| 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)) .....                          | 35935.57                      | 64822.23                          |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....                                    | 35935.57                      | 64822.23                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. DISBURSEMENTS  | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|--|-------------------------------|-----------------------------------|
| 21. Operating Expenditures:  |                               |                                   |
| (a) Shared Federal/Non-Federal Activity (from Schedule H4)                                     |                               |                                   |
| (i) Federal Share.....   | 0.00                          | 0.00                              |
| (ii) Non-Federal Share.....  | 0.00                          | 0.00                              |
| (b) Other Federal Operating Expenditures.....  | 60.00                         | 137.00                            |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➡                        | 60.00                         | 137.00                            |
| 22. Transfers to Affiliated/Other Party Committees.....  | 0.00                          | 0.00                              |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees.....         | 0.00                          | 0.00                              |
| 24. Independent Expenditure (use Schedule E) .....   | 0.00                          | 0.00                              |
| 25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)..... | 0.00                          | 0.00                              |
| 26. Loan Repayments Made.....  | 0.00                          | 0.00                              |
| 27. Loans Made.....  | 0.00                          | 0.00                              |
| 28. Refunds of Contributions To:   |                               |                                   |
| (a) Individuals/Persons Other Than Political Committees .....                                  | 0.00                          | 0.00                              |
| (b) Political Party Committees .....   | 0.00                          | 0.00                              |
| (c) Other Political Committees (such as PACs) .....  | 0.00                          | 0.00                              |
| (d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....                           | 0.00                          | 0.00                              |
| 29. Other Disbursements.....   | 27992.88                      | 46236.61                          |
| 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))..       | 28052.88                      | 46373.61                          |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 28052.88                      | 46373.61                          |

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

| III. Net Contributions/Operating Expenditures                                       | COLUMN A<br>Total This Period | COLUMN B<br>Calendar Year-to-Date |
|---|-------------------------------|-----------------------------------|
| 33. Total Contributions (other than loans)<br>from Line 11(d), page 3) .....        | 30759.08                      | 59642.91                          |
| 34. Total Contribution Refunds<br>(from Line 28(d)) .....                           | 0.00                          | 0.00                              |
| 35. Net Contributions (other than loans)<br>(subtract Line 34 from Line 33) .....   | 30759.08                      | 59642.91                          |
| 36. Total Federal Operating Expenditures<br>(add Line 21(a)(i) and Line 21(b))..... | 60.00                         | 137.00                            |
| 37. Offsets to Operating Expenditures<br>(from Line 15, page 3) .....               | 0.00                          | 0.00                              |
| 38. Net Operating Expenditures<br>(subtract Line 37 from Line 36) .....             | 60.00                         | 137.00                            |

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

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

FOR LINE NUMBER: PAGE 6 / 18

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

**A.**

Full Name (Last, First, Middle Initial)

Hamilton County Dem Party

Mailing Address 6109 Webbland Pl

City

Cincinnati

State

OH

Zip Code

45213

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA16.5390

Amount of Each Receipt this Period

5000.00

Ck#2095 Dated 05/21/08 Re-  
funded

**B.**

Full Name (Last, First, Middle Initial)

Leis for Sheriff Committee

Mailing Address 6506 Werk Rd

City

Cincinnati

State

OH

Zip Code

45248

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

175.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 6 / 2 7 / 2 0 0 8

Transaction ID: SA16.5391

Amount of Each Receipt this Period

175.00

Ck#2088 Dated 05/21/08 Pa-  
rtial Refund

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

5175.00

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

5175.00

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 7 / 18

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

|  |   |
|--|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Bob Klug for State Rep  | <b>Transaction ID:</b> SB29.5369<br><b>Date of Disbursement</b>   |
| Mailing Address 2878 Robers Ave  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 0 6 / 2 0 0 8</div> </div>  |
| City Cincinnati State OH Zip Code 45239  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Fundraiser   | <div>100.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Boone County Democratic Women's Club  | <b>Transaction ID:</b> SB29.5387<br><b>Date of Disbursement</b>   |
| Mailing Address 3006 Monarch Drive   | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 8 / 2 0 0 8</div> </div>  |
| City Burlington State KY Zip Code 41005  | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Ad   | <div>100.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Bowman for Mayor  | <b>Transaction ID:</b> SB29.5383<br><b>Date of Disbursement</b>   |
| Mailing Address 1720 Euclid Ave  | <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 4 / 2 0 0 8</div> </div>  |
| City Covington State KY Zip Code 41014   | <b>Amount of Each Disbursement this Period</b>  |
| Purpose of Disbursement Contribution   | <div>500.00</div>   |
| Candidate Name   | <div>Category/Type</div>  |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼ |

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

700.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 8 / 18

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

**A.** Full Name (Last, First, Middle Initial)  
Brayshaw for County Engineer Committee

Mailing Address 5211 Rapid Run Rd

City Cincinnati State OH Zip Code 45238

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5376

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
Brinker for State Representative

Mailing Address 2335 Beechcreek Lane

City Cincinnati State OH Zip Code 45233

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5384

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Bruce Carter for Judge Committee

Mailing Address PO Box 80

City Monroe State OH Zip Code 45050

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5356

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1250.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 9 / 18

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

**A.** Full Name (Last, First, Middle Initial)  
Campbell County Dem. Wom. Club

Mailing Address 269 Military Pkwy

City State Zip Code  
Ft Thomas KY 41075

Purpose of Disbursement  
Fundriaser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5359

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
Cincinnati AFL-Cio Cope

Mailing Address 1014 Vine St. Suite 2575

City State Zip Code  
Cincinnati OH 45202

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5374

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1250.00

**C.** Full Name (Last, First, Middle Initial)  
Citizens for Bridgman

Mailing Address 7443 Lakepark Drive

City State Zip Code  
West Chester OH 45069

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.5358

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

2150.00

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

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

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

FOR LINE NUMBER:  
(check only one)

PAGE 10 / 18

|                              |                              |                              |                              |  |                              |
|------------------------------|------------------------------|------------------------------|------------------------------|--|------------------------------|
| <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)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

|  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
|--|---|----------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|---|
| <b>A.</b> Full Name (Last, First, Middle Initial)<br>Citizens for Minette Cooper   | <b>Transaction ID:</b> SB29.5380<br><b>Date of Disbursement</b>   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 684 Clinton Springs Ave  | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>1</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 1 | 0 |  | 2 | 0 | 0 | 8 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |          | 1 | 0 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Cincinnati State OH Zip Code 45229  | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Void Ck#2033 Issued 10/10/07  | <table border="1"> <tr> <td>-1000.00</td> </tr> </table>  | -1000.00 |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| -1000.00   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>B.</b> Full Name (Last, First, Middle Initial)<br>Clermont County Democratic Party  | <b>Transaction ID:</b> SB29.5361<br><b>Date of Disbursement</b>   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 10 North Second St   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>2</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 4 |  | 2 | 3 |  | 2 | 0 | 0 | 8 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 4   |          | 2 | 3 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Batavia State OH Zip Code 45103   | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Fundraiser  | <table border="1"> <tr> <td>600.00</td> </tr> </table>  | 600.00   |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 600.00   |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| <b>C.</b> Full Name (Last, First, Middle Initial)<br>Committee to Elect Conover  | <b>Transaction ID:</b> SB29.5364<br><b>Date of Disbursement</b>   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Mailing Address 420 Main St, Ste A   | <table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>5</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>8</td> </tr> </table> | M        | M | / | D | D | / | Y | Y | Y | Y | 0 | 5 |  | 0 | 6 |  | 2 | 0 | 0 | 8 |
| M  | M   | /        | D | D | / | Y | Y | Y | Y |   |   |   |   |  |   |   |  |   |   |   |   |
| 0  | 5   |          | 0 | 6 |   | 2 | 0 | 0 | 8 |   |   |   |   |  |   |   |  |   |   |   |   |
| City Milford State OH Zip Code 45150   | <b>Amount of Each Disbursement this Period</b>  |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Purpose of Disbursement<br>Contribution  | <table border="1"> <tr> <td>1000.00</td> </tr> </table>   | 1000.00  |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| 1000.00  |   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Candidate Name   | Category/<br>Type   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |
| Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President<br>State: District: | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General<br><input type="checkbox"/> Other (specify) ▼   |          |   |   |   |   |   |   |   |   |   |   |   |  |   |   |  |   |   |   |   |

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

600.00

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

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS &amp; M E S LOCAL UNION 392 PAC

**A.**

Full Name (Last, First, Middle Initial)

Committee to Elect Judge Mock to Court of Common Pleas

Mailing Address 8262 Jakaro Drive

City  
CincinnatiState  
OHZip Code  
45255Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5375

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 1 | / | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

Friends of Greg Hartman

Mailing Address 3536 Edwards Rd

City  
CincinnatiState  
OHZip Code  
45208Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5368

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 0 | 6 | / | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

Friends of Tony Klimek

Mailing Address 5970 Eaglet Dr

City  
West ChesterState  
OHZip Code  
45069Purpose of Disbursement  
Contribution

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5372

Date of Disbursement

|   |   |   |   |   |   |   |   |   |   |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 5 | / | 2 | 1 | / | 2 | 0 | 0 | 8 |

Amount of Each Disbursement this Period

500.00

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

2000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

A.

Full Name (Last, First, Middle Initial)

Hamilton County Dem Party

Mailing Address 6109 Webbland PI

City  
Cincinnati

State  
OH

Zip Code  
45213

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5377

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

Hamilton County Dem Party

Mailing Address 6109 Webbland PI

City  
Cincinnati

State  
OH

Zip Code  
45213

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5388

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

Judge Nadel Campaign Committee

Mailing Address 4300 Regency Ridge, Unit 305

City  
Cincinnati

State  
OH

Zip Code  
45248

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5386

Date of Disbursement

06 / 18 / 2008

Amount of Each Disbursement this Period

300.00

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

10300.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

A.

Full Name (Last, First, Middle Initial)

Kathy Groob for Senate

Mailing Address 618 Bakewell Street

City  
Covington

State  
KY

Zip Code  
41011

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5360

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)

Keep State Representative Royce Adams

Mailing Address 580 Bannister Road

City  
Dry Ridge

State  
KY

Zip Code  
41035

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5385

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

Kenton County Dem Womens Club

Mailing Address 787 Kingston Dr

City  
Edgewood

State  
KY

Zip Code  
41017

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:

☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5362

Date of Disbursement

/   /

Amount of Each Disbursement this Period

400.00

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

1400.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

A.

Full Name (Last, First, Middle Initial)

Kenton County Dem Womens Club

Mailing Address 787 Kingston Dr

City  
Edgewood

State  
KY

Zip Code  
41017

Purpose of Disbursement  
Ad

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5367

Date of Disbursement

/   /

Amount of Each Disbursement this Period

130.00

B.

Full Name (Last, First, Middle Initial)

Leis for Sheriff Committee

Mailing Address 6506 Werk Rd

City  
Cincinnati

State  
OH

Zip Code  
45248

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5371

Date of Disbursement

/   /

Amount of Each Disbursement this Period

900.00

C.

Full Name (Last, First, Middle Initial)

Mallory for Citizens

Mailing Address 907 Dayton St.

City  
Cincinnati

State  
OH

Zip Code  
45214

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5355

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

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

1530.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

**A.** Full Name (Last, First, Middle Initial)  
Merrick Krey for State Representative

Mailing Address PO Box 564

City Covington State KY Zip Code 41012

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.5373

Date of Disbursement

05 / 21 / 2008

Amount of Each Disbursement this Period

500.00

**B.** Full Name (Last, First, Middle Initial)  
Mike Howard Campaign

Mailing Address 22 Wellington Drive

City Florence State KY Zip Code 41042

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.5378

Date of Disbursement

05 / 28 / 2008

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
Quin-T Dem Club

Mailing Address 1602 Locust St.

City Pt. Pleasant State OH Zip Code 45153

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.5382

Date of Disbursement

06 / 04 / 2008

Amount of Each Disbursement this Period

1200.00

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

2200.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

A.

Full Name (Last, First, Middle Initial)

Rafalske & Layne

Mailing Address 2186 Victory Parkway

City  
Cincinnati

State  
OH

Zip Code  
45206-2813

Purpose of Disbursement  
1120-POL & Form 990

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5370

Date of Disbursement

/   /

Amount of Each Disbursement this Period

700.00

B.

Full Name (Last, First, Middle Initial)

United Association PEC

Mailing Address 901 Massachusetts Ave NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5363

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1653.24

C.

Full Name (Last, First, Middle Initial)

United Association PEC

Mailing Address 901 Massachusetts Ave NW

City  
Washington

State  
DC

Zip Code  
20001

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For:  
☐ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.5379

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1818.82

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

4172.06

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

PLUMBERS PIPEFITTERS & M E S LOCAL UNION 392 PAC

**A.**

Full Name (Last, First, Middle Initial)

United Association PEC

Mailing Address 901 Massachusetts Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.5389

Date of Disbursement

MM / DD / YYYY  
06 / 26 / 2008

Amount of Each Disbursement this Period

1640.82

**B.**

Full Name (Last, First, Middle Initial)

Warren County Democratic Party

Mailing Address 761 Columbus Ave

City Lebanon State OH Zip Code 45036

Purpose of Disbursement  
Fundraiser

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: ☐ Primary ☐ General  
☐ Other (specify) ▼

Transaction ID: SB29.5357

Date of Disbursement

MM / DD / YYYY  
04 / 02 / 2008

Amount of Each Disbursement this Period

50.00

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

1690.82

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

27992.88

Form/Schedule: **F3XN**  
Transaction ID:

ALL CONTRIBUTIONS ARE UNITEMIZED FROM PAYROLL DEDUCTIONS AND DO NOT AGGREGATE OVER