

# 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

United Association Political Education Committee (United Association of Journey-

ADDRESS (number and street) Three Park Place

Check if different than previously reported. (ACC) Annapolis MD 21401

2. **FEC IDENTIFICATION NUMBER** CITY STATE ZIPCODE

C00012476

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:
- |                                      |                                      |  |  |
|--------------------------------------|--------------------------------------|--|--|
| <input type="checkbox"/> Feb 20 (M2) | <input type="checkbox"/> May 20 (M5) | <input type="checkbox"/> Aug 20 (M8)             | <input type="checkbox"/> Nov 20 (M11) (Non-Election Year Only) |
| <input type="checkbox"/> Mar 20 (M3) | <input type="checkbox"/> Jun 20 (M6) | <input type="checkbox"/> Sep 20 (M9)             | <input type="checkbox"/> Dec 20 (M12) (Non-Election Year Only) |
| <input type="checkbox"/> Apr 20 (M4) | <input type="checkbox"/> Jul 20 (M7) | <input checked="" type="checkbox"/> Oct 20 (M10) | <input type="checkbox"/> Jan 31 (YE)                           |

- (c) 12-Day PRE-Election Report for the:
- |   |  |                                       |
|---|--|---------------------------------------|
| <input type="checkbox"/> Primary (12P)    | <input type="checkbox"/> General (12G) | <input type="checkbox"/> Runoff (12R) |
| <input type="checkbox"/> Convention (12C) | <input type="checkbox"/> Special (12S) |                                       |

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

- (d) 30-Day Post -Election Report for the:
- |  |                                       |  |
|--|---------------------------------------|--|
| <input type="checkbox"/> General (30G) | <input type="checkbox"/> Runoff (30R) | <input type="checkbox"/> Special (30S) |
|--|---------------------------------------|--|

Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 09 01 2007 through 09 30 2007

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

Type or Print Name of Treasurer Assistant Treasurer Patrick R. Perno

Signature of Treasurer Electronically Filed by Assistant Treasurer Patrick R. Perno Date 10 04 2010

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							
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FEC FORM 3X (Rev. 12/2004)

**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

United Association Political Education Committee (United Association of Journey-  
men and A

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="2007"/>		1121309.96
(b) Cash on Hand at Beginning of Reporting Period .....	1488237.78	
(c) Total Receipts (from Line 19) .....	120600.55	1147402.18
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	1608838.33	2268712.14
7. Total Disbursements (from Line 31) .....	130575.00	790448.81
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	1478263.33	1478263.33
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	

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

**For further information contact:**

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

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

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

United Association Political Education Committee (United Association of Journeymen and A

Report Covering the Period: From:    To:

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) .....	0.00	3255.00
(ii) Unitemized .....	117857.77	1114166.31
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	117857.77	1117421.31
(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) .....	117857.77	1117421.31
12. Transfers From Affiliated/Other Party Committees .....	1000.00	5999.00
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	75.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	8500.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	1742.78	15406.87
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)) .....	120600.55	1147402.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	120600.55	1147402.18

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share.....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures.....	75.00	51698.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	75.00	51698.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	120500.00	684750.00
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.....	10000.00	54000.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	130575.00	790448.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	130575.00	790448.81

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	117857.77	1117421.31
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	117857.77	1117421.31
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	75.00	51698.81
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	75.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	75.00	51623.81

# 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

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)  
United Association Political Education Committee (United Association of Journeyman and A

A.

Full Name (Last, First, Middle Initial)  
PLUMBERS AND STEAMFITTERS LOCAL NO 73 FEDERAL PAC FUND

Mailing Address PO BOX 911

City	State	Zip Code
OSWEGO	NY	13126

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

Name of Employer	Occupation

Receipt For:

Primary  General  
 Other (specify) ▼

Aggregate Year-to-Date ▼

2000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	9		1	3		2	0	0	7

Transaction ID: SA12.12688

Amount of Each Receipt this Period

1000.00

Transfer

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	▶	1000.00
<b>TOTAL</b> This Period (last page this line number only) .....	▶	1000.00

# SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 7 / 18	
	(check only one)			
<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12	<input type="checkbox"/> 13
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)  
 United Association Political Education Committee (United Association of Journeyman and A

A.

Full Name (Last, First, Middle Initial) Bank of America		Date of Receipt
Mailing Address 1501 Pennsylvania Avenue, NW		<input type="text" value="09"/> / <input type="text" value="30"/> / <input type="text" value="2007"/>
City	State	Zip Code
Washington	DC	20013
FEC ID number of contributing federal political committee.		Transaction ID: SA17.10602
<input type="text" value="C"/>		Amount of Each Receipt this Period
Name of Employer		<input type="text" value="1742.78"/>
Occupation		Interest for September
Receipt For:	Aggregate Year-to-Date ▼	
<input type="checkbox"/> Primary <input type="checkbox"/> General	<input type="text" value="12906.87"/>	
<input type="checkbox"/> Other (specify) ▼		

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="1742.78"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="1742.78"/>

**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

<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)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

Complete Campaigns, Inc.

Mailing Address 610 Gateway Center Way  
Suite K

City San Diego State CA Zip Code 92102

Purpose of Disbursement  
Subscription

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.10604

Date of Disbursement

09 / 17 / 2007

Amount of Each Disbursement this Period

75.00

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

75.00

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

75.00

**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 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)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>DANIEL K AKAKA</b>  Mailing Address <b>PO BOX 3169</b>  City <b>HONOLULU</b> State <b>HI</b> Zip Code <b>96802</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>DANIEL K AKAKA</b> Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2008</b> <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>HI</b> District: <b>00</b>	Transaction ID: <b>SB23.10614</b> Date of Disbursement 09 / 12 / 2007  Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>BARROW, JOHN J</b>  Mailing Address <b>255 Milledge Heights</b>  City <b>Athens</b> State <b>GA</b> Zip Code <b>30606</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>BARROW, JOHN J</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2008</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: <b>GA</b> District: <b>12</b>	Transaction ID: <b>SB23.10631</b> Date of Disbursement 09 / 27 / 2007  Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>Democratic National Committee</b>  Mailing Address <b>430 South Capitol Street, SE</b>  City <b>Washington</b> State <b>DC</b> Zip Code <b>20003</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>Democratic National Committee</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <b>2007</b> <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: <b>SB23.10638</b> Date of Disbursement 09 / 20 / 2007  Amount of Each Disbursement this Period 15000.00

<b>SUBTOTAL</b> of Disbursements This Page (optional) ..... ▶	<b>25000.00</b>
<b>TOTAL</b> This Period (last page this line number only) ..... ▶	

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

United Association Political Education Committee (United Association of Journeymen and A

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) Joe Donnelly for Congress</p> <p>Mailing Address P.O. Box 1961</p> <p>City South Bend State IN Zip Code 46634</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Joe Donnelly for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10623</p> <p>Date of Disbursement 09 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) Joe Donnelly for Congress</p> <p>Mailing Address P.O. Box 1961</p> <p>City South Bend State IN Zip Code 46634</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name Joe Donnelly for Congress</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 02</p> <p>Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10624</p> <p>Date of Disbursement 09 / 26 / 2007</p> <p>Amount of Each Disbursement this Period 2500.00</p>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) FILNER, BOB</p> <p>Mailing Address PO BOX 127868</p> <p>City SAN DIEGO State CA Zip Code 92112</p> <p>Purpose of Disbursement Transfer</p> <p>Candidate Name FILNER, BOB</p> <p>Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 51</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p><b>Transaction ID:</b> SB23.10613</p> <p>Date of Disbursement 09 / 12 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p>

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

7000.00

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

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

JOHN JOSEPH HALL

Mailing Address 21 RIDGE RD

City DOVER PLAINS State NY Zip Code 12522

Purpose of Disbursement Transfer

Candidate Name JOHN JOSEPH HALL

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: NY District: 19

Transaction ID: SB23.10632

Date of Disbursement

09 / 27 / 2007

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

PAUL W HODES

Mailing Address 26 South Main St. #253

City Concord State NH Zip Code 03301

Purpose of Disbursement Transfer

Candidate Name PAUL W HODES

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: NH District: 02

Transaction ID: SB23.10605

Date of Disbursement

09 / 05 / 2007

Amount of Each Disbursement this Period

5000.00

C.

Full Name (Last, First, Middle Initial)

TIM JOHNSON

Mailing Address PO BOX 1859

City SIOUX FALLS State SD Zip Code 57101

Purpose of Disbursement Transfer

Candidate Name TIM JOHNSON

Category/Type

Office Sought:  House  Senate  President

Disbursement For: 2008  Primary  General  Other (specify) ▼

State: SD District: 00

Transaction ID: SB23.10610

Date of Disbursement

09 / 11 / 2007

Amount of Each Disbursement this Period

5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

11000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>RON KLEIN FOR CONGRESS</b>  Mailing Address  City State Zip Code  Purpose of Disbursement Transfer Candidate Name <b>RON KLEIN</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 22 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10616 Date of Disbursement 09 / 21 / 2007  Amount of Each Disbursement this Period 5000.00
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>TIMOTHY EDWARD MAHONEY</b>  Mailing Address 355 CASTLEROCK RD  City State Zip Code <b>VENUS FL 33960</b>  Purpose of Disbursement Transfer Candidate Name <b>TIMOTHY EDWARD MAHONEY</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: FL District: 16 Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10617 Date of Disbursement 09 / 21 / 2007  Amount of Each Disbursement this Period 5000.00
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>WILLIAM J MCCAMLEY</b>  Mailing Address PO BOX 6552  City State Zip Code <b>LAS CRUCES NM 88006</b>  Purpose of Disbursement Transfer Candidate Name <b>WILLIAM J MCCAMLEY</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NM District: 02 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB23.10629 Date of Disbursement 09 / 27 / 2007  Amount of Each Disbursement this Period 5000.00

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

**15000.00**

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

.....

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

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MICHAEL ANTHONY MONTAGANO</b>	<b>Transaction ID:</b> SB23.10608
	Mailing Address 56022 DANA DR	Date of Disbursement MM / DD / YYYY 09 / 06 / 2007
	City BRISTOL State IN Zip Code 46507	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer Candidate Name MICHAEL ANTHONY MONTAGANO Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: IN District: 03 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>JOHN WALTER OLVER</b>	<b>Transaction ID:</b> SB23.10606
	Mailing Address 1333 WEST STREET	Date of Disbursement MM / DD / YYYY 09 / 05 / 2007
	City AMHERST State MA Zip Code 01002	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer Candidate Name JOHN WALTER OLVER Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: MA District: 01 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>BILL RICHARDSON</b>	<b>Transaction ID:</b> SB23.10633
	Mailing Address PO BOX 26208	Date of Disbursement MM / DD / YYYY 09 / 27 / 2007
	City ALBUQUERQUE State NM Zip Code 87125	Amount of Each Disbursement this Period 5000.00
	Purpose of Disbursement Transfer Candidate Name BILL RICHARDSON Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President State: District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type

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

15000.00

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

# SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:  
(check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

A.	Full Name (Last, First, Middle Initial) <b>BILL RICHARDSON</b>  Mailing Address <b>PO BOX 26208</b>  City <b>ALBUQUERQUE</b> State <b>NM</b> Zip Code <b>87125</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>BILL RICHARDSON</b> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input checked="" type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District: 00	Transaction ID: <b>SB23.10635</b> Date of Disbursement 09 / 27 / 2007  Amount of Each Disbursement this Period 5000.00
B.	Full Name (Last, First, Middle Initial) <b>Adam Schiff for Congress</b>  Mailing Address <b>425 Amherst Drive</b>  City <b>Burbank</b> State <b>CA</b> Zip Code <b>91504</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>Adam Schiff for Congress</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 27	Transaction ID: <b>SB23.10627</b> Date of Disbursement 09 / 27 / 2007  Amount of Each Disbursement this Period 2500.00
C.	Full Name (Last, First, Middle Initial) <b>Adam Schiff for Congress</b>  Mailing Address <b>425 Amherst Drive</b>  City <b>Burbank</b> State <b>CA</b> Zip Code <b>91504</b> Purpose of Disbursement <b>Transfer</b> Candidate Name <b>Adam Schiff for Congress</b> Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: CA District: 27	Transaction ID: <b>SB23.10628</b> Date of Disbursement 09 / 27 / 2007  Amount of Each Disbursement this Period 2500.00

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

**10000.00**

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

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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b>	Full Name (Last, First, Middle Initial) Allyson Schwartz for Congress	Transaction ID: SB23.10618 Date of Disbursement 09 / 21 / 2007
	Mailing Address 7200 Sherman Street	Amount of Each Disbursement this Period 5000.00
	City Philadelphia State PA Zip Code 19119	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name Allyson Schwartz for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: PA District: 13	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b>	Full Name (Last, First, Middle Initial) CHRISTOPHER H. SMITH	Transaction ID: SB23.10621 Date of Disbursement 09 / 25 / 2007
	Mailing Address PO Box 3184	Amount of Each Disbursement this Period 5000.00
	City Hamilton State NJ Zip Code 08619	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name CHRISTOPHER H. SMITH	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District: 04	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b>	Full Name (Last, First, Middle Initial) Hilda Solis for Congress	Transaction ID: SB23.10607 Date of Disbursement 09 / 05 / 2007
	Mailing Address 8665 Wilshire Boulevard #220	Amount of Each Disbursement this Period 5000.00
	City Beverly Hills State CA Zip Code 95814	Category/ Type
	Purpose of Disbursement Transfer	
Candidate Name Hilda Solis for Congress	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: CA District: 31	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

15000.00

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



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

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

FOR LINE NUMBER: (check only one)

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)

United Association Political Education Committee (United Association of Journeymen and A

<b>A.</b> Full Name (Last, First, Middle Initial) JAMES H JR MR WEBB <hr/> Mailing Address 1200 N NASH STREET #827 <hr/> City ARLINGTON State VA Zip Code 22209 <hr/> Purpose of Disbursement Transfer Candidate Name JAMES H JR MR WEBB Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President State: VA District: 00 Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10612 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 1 2 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00
<b>B.</b> Full Name (Last, First, Middle Initial) PETER WELCH <hr/> Mailing Address 346 TOWN FARM HILL ROAD <hr/> City HARTLAND State VT Zip Code 05048 <hr/> Purpose of Disbursement Transfer Candidate Name PETER WELCH Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: VT District: 00 Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB23.10619 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 1 / 2 0 0 7
	Amount of Each Disbursement this Period 5000.00

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

10000.00

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

120500.00

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

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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)

United Association Political Education Committee (United Association of Journeymen and A

A.

Full Name (Last, First, Middle Initial)

Indn's List Education Fund

Mailing Address 406 S Boulder

City Tulsa State OK Zip Code 74103

Purpose of Disbursement  
Transfer

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.10636

Date of Disbursement

09 / 21 / 2007

Amount of Each Disbursement this Period

10000.00

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

10000.00

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

10000.00