24038573568

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED
FEC MAIL
OPERATIONS CENTER

Organization Type A. 10 25

1. NAME OF COMMITTEE (In full) — TYPE OR PRINT ▼ — Example: If typing, type over the lines. — 12TE4M5

DAVID A. BARDIANO
OPERATING ENGINEERS LOCAL 98 SOCIAL ACTION FUND

ADDRESS (number and street) ▼
2 CENTER SQUARE
PO BOX 219

☐ Check if different than previously reported. (ACC)

EAST LONGMEADOW — MA — 01028-0219

CITY ▲ — STATE ▲ — ZIP CODE ▲

2. FEC IDENTIFICATION NUMBER ▼ — C00142083

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 Year-End Report (YE)
- ☐ July 31 Mid-Year Report (Non-Election Year Only) (MY)
- ☐ Termination Report (TER)

(b) Monthly Report Due On:

- ☐ Feb 20 (M2)
- ☐ Mar 20 (M3)
- ☐ Apr 20 (M4)
- ☐ May 20 (M5)
- ☐ Jun 20 (M6)
- ☐ Jul 20 (M7)
- ☐ Aug 20 (M8)
- ☐ Sep 20 (M9)
- ☐ Oct 20 (M10)
- ☐ Nov 20 (M11) (Non-Election Year Only)
- ☐ Dec 20 (M12) (Non-Election Year Only)
- ☐ Jan 31 (YE)

(c) 12-Day PRE-Election Report for the: ☐ Primary (12P) ☐ General (12G) ☐ Runoff (12R) ☐ Convention (12C) ☐ Special (12S)

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 07 01 2003 through 09 30 2003

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 PHILIP C. CHAFFEE

Signature of Treasurer Philip C. Chaffee — Date 10 23 2003

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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