

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2 of 16

Write or Type Committee Name UNITED ASSOCIATION OF PLUMBERS &
STEAMFITTERS LOCAL UNION 47 C00163477

Report Covering the Period: From: MM DD YYYY 01 01 2009 To: MM DD YYYY 06 30 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2008 <u>2009</u>	<u>2009</u>	<u>2724.03</u>
(b) Cash on Hand at Beginning of Reporting Period.....	<u>2724.03</u>	
(c) Total Receipts (from Line 19).....	<u>7690.69</u>	<u>7690.69</u>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<u>10414.72</u>	<u>10414.72</u>
7. Total Disbursements (from Line 31).....	<u>8948.75</u>	<u>8948.75</u>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<u>1465.97</u>	<u>1465.97</u>
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....	<u>0</u>	

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

29030114570

DETAILED SUMMARY PAGE
of Receipts

FEC Form 3X (Rev. 02/2003)

Page 3 of 16

Write or Type Committee Name Plumbers & Steam Fitters Local 47
C00163477

Report Covering the Period: From: 01' 01' 2009 To: 06' 30' 2009

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).....

00

00

(ii) Unitemized.....

7,687.03

7,687.03

(iii) TOTAL (add Lines 11(a)(i) and (ii)).....▶

7,687.03

7,687.03

(b) Political Party Committees.....

00

00

(c) Other Political Committees (such as PACs).....

00

00

(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....▶

7,687.03

7,687.03

12. Transfers From Affiliated/Other Party Committees.....

00

00

13. All Loans Received.....

00

00

14. Loan Repayments Received.....

00

00

15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....

00

00

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

00

00

17. Other Federal Receipts (Dividends, Interest, etc.).....

03.66

03.66

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account (from Schedule H3).....

00

00

(b) Levin Funds (from Schedule H5).....

00

00

(c) Total Transfers (add 18(a) and 18(b))..

00

00

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

7,690.69

7,690.69

20. Total Federal Receipts (subtract Line 18(c) from Line 19).....▶

7,690.69

7,690.69

29030114571

DETAILED SUMMARY PAGE
of Disbursements

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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	
(ii) Non-Federal Share.....	0	
(b) Other Federal Operating Expenditures	624.72	624.72
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	624.72	624.72
22. Transfers to Affiliated/Other Party Committees.....	5,000.00	5,000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	4,750.00	4,750.00
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made.....	0	0
27. Loans Made.....	0	0
28. Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	96.87	96.87
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs).....	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	96.87	96.87
29. Other Disbursements	2,752.16	2,752.16
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b)).....	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	8,948.75	8,948.75
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	8,948.75	8,948.75

29030114572

DETAILED SUMMARY PAGE
of Disbursements

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

7,687.03
968.7
7,590.16
624.72
0
624.72

7,687.03
968.7
7,590.16
624.72
0
624.72

29030114573

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 16	
	<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
	<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 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) **C00163477**
United Association of Plumbers & Steamfitters Local 47

A. National City Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address **116 Allegheny Center Mall**
 City **Pittsburgh** State **Pa.** Zip Code **15212-5356**
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt **01/30/2009**
 Amount of Each Receipt this Period **\$93**
Checking Account Interest

B. National City Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt **02/27/2009**
 Amount of Each Receipt this Period **\$1.12**
Checking Acct. Int.

C. National City Bank
 Full Name (Last, First, Middle Initial)
 Mailing Address
 City State Zip Code
 FEC ID number of contributing federal political committee. **C**
 Name of Employer Occupation
 Receipt For: Primary General Other (specify) ▼
 Aggregate Year-to-Date ▼

Date of Receipt **03/31/2009**
 Amount of Each Receipt this Period **\$59**
Checking Account Int.

SUBTOTAL of Receipts This Page (optional) ▶ **\$2.64**
TOTAL This Period (last page this line number only) ▶

29030114574

**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)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<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) **COO163477**
United Association of Plumbers & Steamfitters Local 47

Full Name (Last, First, Middle Initial)
A. National City Bank

Mailing Address
116 Allegheny Center Mall

City **Pittsburgh** State **Pa.** Zip Code **15212-5356**

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
04 30 2009

Amount of Each Receipt this Period
\$56
Checking Account Int

29030114575

Full Name (Last, First, Middle Initial)
B. National City Bank

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
05 29 2009

Amount of Each Receipt this Period
\$34
Checking Account Int

Full Name (Last, First, Middle Initial)
C. National City Bank

Mailing Address

City State Zip Code

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt
06 30 2009

Amount of Each Receipt this Period
\$12

SUBTOTAL of Receipts This Page (optional) ▶

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

\$102
\$366

**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 OF 16
	<input checked="" type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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NAME OF COMMITTEE (In Full) **C00163477**
United Association of Plumbers & Steamfitters Local 47

A. Full Name (Last, First, Middle Initial) **Bovalino, Frank E.**

Mailing Address **200 4th St.**

City **Beaver** State **Pa.** Zip Code **15009**

Purpose of Disbursement **Reimbursement for Postage Fed & State Reps** Category/Type **06**

Office Sought: House Senate President

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

Date of Disbursement **01/21/2009**

Amount of Each Disbursement this Period **10.81**

B. Full Name (Last, First, Middle Initial) **Staples**

Mailing Address **3938 Brodhead Rd.**

City **Monaca** State **Pa.** Zip Code **15061**

Purpose of Disbursement **Office Supplies (Paper, Ink, Envelopes)** Category/Type **06**

Office Sought: House Senate President

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

Date of Disbursement **01/21/2009**

Amount of Each Disbursement this Period **113.91**

C. Full Name (Last, First, Middle Initial) **Charles J. Loll Inc.**

Mailing Address **1122 3rd St.**

City **Beaver** State **Pa.** Zip Code **15009**

Purpose of Disbursement **990 Form** Category/Type **01**

Office Sought: House Senate President

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

Date of Disbursement **05/13/2009**

Amount of Each Disbursement this Period **500.00**

SUBTOTAL of Disbursements This Page (optional) **624.72**

TOTAL This Period (last page this line number only) **624.72**

29030114576

**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 checked="" 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)

C00163477

United Association of Plumbers & Steamfitters LOCAL 47

Full Name (Last, First, Middle Initial)

Date of Disbursement

02' 20' 2009

A. Pa Pipe Trades c/o Thomas P. Gallo Sec/Treas

Mailing Address

14420 TOWNSEND Rd Suite A

City

Philadelphia

State

Pa.

Zip Code

19154-1028

Purpose of Disbursement

Transfer to State affiliate

Candidate Name

N/A

Category/
Type

Amount of Each Disbursement this Period

2,500.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

05' 08' 2009

B. Pa Pipe Trades c/o Thomas P. Gallo Sec/Treas

Mailing Address

14420 TOWNSEND Rd Suite A

City

Philadelphia

State

Pa.

Zip Code

19154-1028

Purpose of Disbursement

Transfer to State affiliate

Candidate Name

N/A

Category/
Type

Amount of Each Disbursement this Period

2500.00

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

C. Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/
Type

Amount of Each Disbursement this Period

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

SUBTOTAL of Disbursements This Page (optional)

5,000.00

TOTAL This Period (last page this line number only)

5,000.00

29030114577

**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 OF 16
	<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) **C00163477**
United Association of Plumbers & Steamfitters LOCAL 47

Full Name (Last, First, Middle Initial) A. Dahl Kemper for Congress		Date of Disbursement 05 29 2009
Mailing Address P.O. Box 1045		Amount of Each Disbursement this Period 250.00
City Erie	State Zip Code Pa. 16512	
Purpose of Disbursement Lunch Reception Fund Raiser		Category/Type
Candidate Name Kathy Dahl Kemper		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Fund Raiser	
State: Pa	District: 3RD	

Full Name (Last, First, Middle Initial) B. Dahlkemper for Congress		Date of Disbursement 06 17 2009
Mailing Address PO Box 1045		Amount of Each Disbursement this Period 225.00
City Erie	State Zip Code Pa. 16512	
Purpose of Disbursement Steak Fry Fund Raiser		Category/Type
Candidate Name Kathy Dahlkemper		
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Fund Raiser	
State: Pa	District: 3RD	

Full Name (Last, First, Middle Initial) C.		Date of Disbursement
Mailing Address		
City	State Zip Code	
Purpose of Disbursement		Amount of Each Disbursement this Period
Candidate Name		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State:	District:	

SUBTOTAL of Disbursements This Page (optional)	475.00
TOTAL This Period (last page this line number only)	475.00

29030114578

**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) **C00163477**
United Association of Plumbers & Steamfitters LOCAL 47

A.

Full Name (Last, First, Middle Initial) **Wayn Cawley, WAYNE**

Mailing Address **11624 OLD Lake Road**

City **Northeast** State **Pa** Zip Code **16428**

Purpose of Disbursement **REFund of 2008 Contributions**

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement **02 / 16 / 2009**

Amount of Each Disbursement this Period **96.87**

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement _____

Amount of Each Disbursement this Period _____

SUBTOTAL of Disbursements This Page (optional) _____

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

96.87

29030114579

**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) **C00163477**
United Association of Plumbers & Steamfitters Local 47

A. PA AFL-CIO-

Date of Disbursement: 03'02'2009

Amount of Each Disbursement this Period: 200.00

Mailing Address: 319 Market St.
City: Harrisburg Pa Zip Code: 17101
Purpose of Disbursement: COPE Registration (Training)
Candidate Name: N/A
Office Sought: House Senate President
Disbursement For: Primary General
Other (specify)

B. Holiday Inn - Harrisburg East

Date of Disbursement: 05'09'2009

Amount of Each Disbursement this Period: 329.67

Mailing Address: 4751 Lindle Rd.
City: Harrisburg Pa Zip Code: 17111
Purpose of Disbursement: Lodging for attending Training Conf.
Candidate Name: N/A
Office Sought: House Senate President
Disbursement For: Primary General
Other (specify)

C. Bovalino, Frank E

Date of Disbursement: 06'04'2009

Amount of Each Disbursement this Period: 316.80

Mailing Address: 200 4th St.
City: Beaver Pa Zip Code: 15009
Purpose of Disbursement: Reimbursement for traveling Expense
Candidate Name: COPE Training Conference
Office Sought: House Senate President
Disbursement For: Primary General
Other (specify)

SUBTOTAL of Disbursements This Page (optional) **846.47**

TOTAL This Period (last page this line number only)

29030114580

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 13 OF 16
	<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) **C00163477**
United Association of Plumbers & Steamfitters LOCAL 47

A. Center Democratic Committee
 Mailing Address: **118 Mulberry Lane**
 City: **Monaca** State: **Pa** Zip Code: **15061**
 Purpose of Disbursement: **Spring Banquet - Fund Raiser**
 Candidate Name: **N/A**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) **N/A**
 State: _____ District: _____

Date of Disbursement: **04'06'2009**
 Amount of Each Disbursement this Period: **200.00**
 Category/Type: **11**

B. Beaver County Democratic Party Committee
 Mailing Address: **PO Box 64**
 City: **Monaca** State: **Pa.** Zip Code: **15061**
 Purpose of Disbursement: **Spring Banquet - Fund Raiser**
 Candidate Name: **N/A**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) **N/A**
 State: _____ District: _____

Date of Disbursement: **04'06'2009**
 Amount of Each Disbursement this Period: **500.00**
 Category/Type: **11**

C. Committee to elect Nancy Cozzucoli Werme
 Mailing Address: **1301 Corporation St.**
 City: **Beaver** State: **Pa.** Zip Code: **15009**
 Purpose of Disbursement: **FUND RAISER DANCE**
 Candidate Name: **N/A**
 Office Sought: House Senate President
 Disbursement For: Primary General Other (specify) **N/A**
 State: _____ District: _____

Date of Disbursement: **04'07'2009**
 Amount of Each Disbursement this Period: **200.80**
 Category/Type: **11**

SUBTOTAL of Disbursements This Page (optional) **900.00**
 TOTAL This Period (last page this line number only) **900.00**

29030114581

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

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)						PAGE 14 OF 16
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b	

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NAME OF COMMITTEE (In Full) **C00163477**
United Association of Plumbers & Steamfitters Local 47

29030114582

A Friends of Mark DiVecchio

Mailing Address: 4735 Parkwood Drive

City: Erie State: Pa Zip Code: 16510

Purpose of Disbursement: FUND RAISER

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 03' 09' 2009

Amount of Each Disbursement this Period: 250.00

Category/Type: 11

B Committed to Elect Joe Sinnott

Mailing Address: 3919 Dexter Ave

City: Erie State: Pa Zip Code: 16504

Purpose of Disbursement: FUND RAISER - DINNER

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 03' 27' 2009

Amount of Each Disbursement this Period: 50.00

Category/Type: 11

C Friends for Larry Curtis

Mailing Address: 3410 West 42nd St.

City: Erie State: Pa Zip Code: 16506

Purpose of Disbursement: FUND RAISER

Candidate Name: _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: _____ District: _____

Date of Disbursement: 04' 01' 2009

Amount of Each Disbursement this Period: 50.00

Category/Type: 11

SUBTOTAL of Disbursements This Page (optional) **350.00**

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 15 OF 16
	<input type="checkbox"/> 21b 27	<input type="checkbox"/> 22 28a	<input type="checkbox"/> 23 28b	<input type="checkbox"/> 24 28c	<input checked="" type="checkbox"/> 25 29	<input type="checkbox"/> 26 30b	

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) **C00163477**
United Association of Plumbers & Steamfitters LOCAL 47

29030114583

A. Full Name (Last, First, Middle Initial) Committee to elect John Tretter

Mailing Address 451 West 9th St.

City Erie State Pa. Zip Code 16502

Purpose of Disbursement Fund Raiser Dinner

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement 05' 02' 2009

Amount of Each Disbursement this Period 1.1
150.00

B. Full Name (Last, First, Middle Initial) Committee to elect Jim Thompson

Mailing Address 660 East 10th Street

City Erie State Pa. Zip Code 16503

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement 05' 02' 2009

Amount of Each Disbursement this Period 100.00

C. Full Name (Last, First, Middle Initial) Friends of Bill Mackey

Mailing Address 112 Lime Kiln Drive

City Andreas State Pa. Zip Code 18211

Purpose of Disbursement Campaign Contribution

Candidate Name _____

Office Sought: House Senate President N/A

Disbursement For: Primary General Other (specify) _____ N/A

State: _____ District: _____

Date of Disbursement 05' 08' 2009

Amount of Each Disbursement this Period 100.00

SUBTOTAL of Disbursements This Page (optional) 350.00

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 16 OF 16				
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 23 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full) **C00163477**
United Association of Plumbers & Steamfitters Local 47

A.

Full Name (Last, First, Middle Initial) **Committed to Elect Casey Staab**

Date of Disbursement **05' 08' 2009**

Mailing Address **1223 Park Road**

City **Espyville** State **Pa** Zip Code **16424**

Purpose of Disbursement **Campaign Donation**

Candidate Name **N/A**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **N/A**

State: _____ District: _____

Amount of Each Disbursement this Period **300.00**

Category/Type

B.

Full Name (Last, First, Middle Initial) **Frank E Bovalino**

Date of Disbursement **05' 02' 2009**

Mailing Address **200 4th St.**

City **Beaver** State **Pa** Zip Code **15009**

Purpose of Disbursement **Postage Reimbursement**

Candidate Name **N/A**

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) **Receipt Reimbursement**

State: _____ District: _____

Amount of Each Disbursement this Period **5.69**

Category/Type

C.

Full Name (Last, First, Middle Initial)

Date of Disbursement

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: House Senate President

Disbursement For: Primary General Other (specify)

State: _____ District: _____

Amount of Each Disbursement this Period

Category/Type

SUBTOTAL of Disbursements This Page (optional) **305.69**

TOTAL This Period (last page this line number only) **2752.16**

29030114584

Federal Election Commission
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<input type="checkbox"/> USPS Express Mail	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery <input type="checkbox"/>	
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
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29030114585