

FEDERAL
OPERATIONS CENTER
NOV 10 A 9 40

**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full)

TYPE OR PRINT

Example: If typing, type over the lines.

12 FEB 4MS

Plumbers & Pipefitters Local 51 Political Action Committee

ADDRESS (number and street)

111 Hemingway Dr

Check if different than previously reported. (AOC)

West Providence RI 02907

2. FEC IDENTIFICATION NUMBER

CITY

STATE

ZIP CODE

C00329326

3. IS THIS REPORT

NEW

(N)

OR

AMENDED

(A)

4. TYPE OF REPORT (Choose One)

(a) 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) (Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(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)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Special (12S)

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

07/01/2004

through

09/30/2004

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

Michael J. Camero

Signature of Treasurer

Michael J. Camero

Date

10/15/2004

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. 02/2003)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Plumbers & Pipefitters Local 51 Political Action Committee

Report Covering the Period:

From:

02/01/2004

To:

08/30/2004

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6 (a) Cash on Hand January 1, 2004	2273.73	2273.73
(b) Cash on Hand at Beginning of Reporting Period	2273.73	
(c) Total Receipts (from Line 19)	0	0
(d) Total (add Lines 6(b) and 6(c) for Column A and Lines 6(b) and 6(c) for Column B)	2273.73	2273.73
7. Total Disbursements (from Line 31)	0	0
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	2273.73	2273.73
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0	

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. 02/2013)

Page 3

Write or Type Committee Name

Members & Pipelayers Local 57 Political Action Committee

Report Covering the Period:

From:

07/01/2011

To:

09/30/2011

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).....		
(ii) Unitemized.....		
(ii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶		
(b) Political Party Committees.....		
(c) Other Political Committees (such as PACs).....		
(c) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 3B, page 5)..... ▶		
12 Transfers from Affiliated/Other Party Committees.....		
13 All Loans Received.....		
14 Loan Repayments Received.....		
15 Offsets to Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 3F, page 5).....		
16 Refunds of Contributions Made to Federal Candidates and Other Political Committees.....		
17 Other Federal Receipts (Dividends, Interest, etc.).....		
18 Transfers from Non-Federal and Levin Funds:		
(a) Non-Federal Account (from Schedule H3).....		
(b) Levin Funds (from Schedule H5).....		
(c) Total Transfers (add 18(a) and 18(b)).....		
19 Total Receipts (add Lines 11(c), 12, 13, 14, 15, 16, 17, and 18(c))..... ▶		
20 Total Federal Receipts (subtract Lines 16(c) from Line 19)..... ▶		

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 301 (Rev. 02/2003)

Page 4

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		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Federal Election Activity (2 U.S.C. §431(2C))		
(a) Allocated Federal Election Activity (from Schedule H4)		
(i) Federal Share		
(ii) "Levied" Share		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))		
32. Total Federal Disbursements (subtract Line 21(a)(i) and Line 30(a)(i) from Line 31)		

**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2008)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)		
34. Total Contribution Returns (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(e))		
37. Offsets to Operating Expenditures (from Line 15, page 3)		
38. Net Operating Expenditures (subtract Line 37 from Line 36)		

**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 OF	
<input checked="" 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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input type="checkbox"/> 16	<input type="checkbox"/> 17	

Any information copied from such Reports and Statements may not be valid 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 contributors.

NAME OF COMMITTEE (in Full)
Members & Proprietor Local 51 Political Action Committee

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee:

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date

Date of Receipt: / /

Amount of Each Receipt this Period:

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee:

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date

Date of Receipt: / /

Amount of Each Receipt this Period:

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

FEC ID number of contributing federal political committee:

Name of Employer _____ Occupation _____

Receipt For:
 Primary General
 Other (specify) _____

Aggregate Year-to-Date

Date of Receipt: / /

Amount of Each Receipt this Period:

SUBTOTAL of Receipts This Page (optional)

TOTAL This Period (last page this line number only)

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

Use separate schedule(s) for each category of the Detailed Summary Page		FOR LINE NUMBER: (check only one)		PAGE OF	
<input type="checkbox"/> 21	<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"/> 28	<input type="checkbox"/> 29	<input type="checkbox"/> 30	<input type="checkbox"/> 31	<input type="checkbox"/> 32

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)
Plumbers & Pipefitters Political Action Committee

A.

Full Name (Last, First, Middle Initial) _____

Meeting 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: _____

Category/Type: _____

B.

Full Name (Last, First, Middle Initial) _____

Meeting 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: _____

Category/Type: _____

C.

Full Name (Last, First, Middle Initial) _____

Meeting 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: _____


Category/Type: _____

SUBTOTAL of Disbursements This Page (optional) _____

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

Federal Election Commission
**ENVELOPE REPLACEMENT PAGE
 FOR INCOMING DOCUMENTS**

The FEC added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/> Hand Delivered	Date of Receipt
<input checked="" type="checkbox"/> USPS First Class Mail	Postmarked 11-5-04
<input type="checkbox"/> USPS Registered/Certified	Postmarked (R/C)
<input type="checkbox"/> USPS Priority Mail	Postmarked
<input type="checkbox"/> Delivery Confirmation™ Label <input type="checkbox"/>	
<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
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
<input type="checkbox"/> Received from Electronic Filing Office	Date of Receipt
<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked
 PREPARER	11-10-04 DATE PREPARED