

# FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED  
FEC MAIL  
NATION'S CENTER  
OPE 2004 OCT 18 A 10 08  
Office Use Only

1. NAME OF COMMITTEE (In full) TYPE OR PRINT Example: If typing, type over the lines. **12FE4M5**  
U.A. PLUMBERS & STEAMFITTERS LOCAL #22 PAC, INC.

ADDRESS (number and street) 3651 CALIFORNIA RD.  
 Check if different than previously reported. (ACC) ORCHARD PARK NY 144127

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE  
**C00368415** 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)  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 (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 / 01 / 2009

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 W. McShally  
Signature of Treasurer [Signature] Date 10 / 12 / 2009

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §4379.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 03/2003)

Page 2

Write or Type Committee Name

*U.A. Phosphate & Steamfitters Local 20 P.M.C. INC.*

Report Covering the Period: From:    To:

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1, <input type="text" value="2,004"/>		<input type="text" value="14,070.69"/>
(b) Cash on Hand at Beginning of Reporting Period.....	<input type="text" value="15,560.01"/>	
(c) Total Receipts (from Line 19).....	<input type="text" value="5,935.56"/>	<input type="text" value="15,133.32"/>
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	<input type="text" value="20,995.57"/>	<input type="text" value="29,204.01"/>
7. Total Disbursements (from Line 21).....	<input type="text" value="6,573.15"/>	<input type="text" value="14,781.59"/>
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	<input type="text" value="14,422.42"/>	<input type="text" value="14,422.42"/>
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D).....	<input type="text" value="0"/>	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D).....	<input type="text" value="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. 02/2003)

Page 3

Write or Type Committee Name

*U.A. Plumbers & Steamfitters Local #1 PBC Inc*

Report Covering the Period:

From:

*07 01 2004*

To:

*09 30 2004*

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).....	<i>0</i>	<i>0</i>
(ii) Unitemized .....	<i>543,556</i>	<i>151,333.2</i>
(iii) TOTAL (add Lines 11(a)(i) and (ii)).....	<i>543,556</i>	<i>151,333.2</i>
(b) Political Party Committees .....	<i>0</i>	<i>0</i>
(c) Other Political Committees (such as PACs).....	<i>0</i>	<i>0</i>
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5).....	<i>543,556</i>	<i>151,333.2</i>
12. Transfers From Affiliated/Other Party Committees.....	<i>0</i>	<i>0</i>
13. All Loans Received .....	<i>0</i>	<i>0</i>
14. Loan Repayments Received.....	<i>0</i>	<i>0</i>
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	<i>0</i>	<i>0</i>
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	<i>0</i>	<i>0</i>
17. Other Federal Receipts (Dividends, Interest, etc.).....	<i>0</i>	<i>0</i>
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	<i>0</i>	<i>0</i>
(b) Levin Funds (from Schedule H5).....	<i>0</i>	<i>0</i>
(c) Total transfers (add 18(a) and 18(b)).....	<i>0</i>	<i>0</i>
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....	<i>543,556</i>	<i>151,333.2</i>
20. Total Federal Receipts (subtract Line 18(c) from Line 19).....	<i>0</i>	<i>0</i>

**DETAILED SUMMARY PAGE**  
of Disbursements

B. 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	0
(ii) Non-Federal Share .....	0	0
(b) Other Federal Operating Expenditures .....	0	0
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	0	0
22. Transfers to Affiliated/Other Party Committees .....	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees .....	0	0
24. Independent Expenditures (use Schedule E) .....	0	0
25. Coordinated Party Expenditures (2 U.S.C. §41a(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 .....	0	0
(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)) .....	0	0
29. Other Disbursements .....	657,315	14,781,599
30. Federal Election Activity (2 U.S.C. §431(2))		
(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)) .....	657,315	14,781,599
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31) .....	0	0

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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) .....	543556	1513332
34. Total Contribution Refunds (from Line 28(d)) .....	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	543556	1513332
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	0	0
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0	0
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	543556	1513332

**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 1 OF 4

<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 checked="" type="checkbox"/> 29	<input type="checkbox"/> 29	<input type="checkbox"/> 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)

*U.A. Plumbers & Steam Fitters Local # 100 Inc.*

Full Name (Last, First, Middle Initial)

**A.** *Mark H. Thomas for Congress*

Date of Disbursement

*07 09 2009*

Mailing Address

*P.O. Box 282*

City

*Fredonia*

State

*N.Y.*

Zip Code

*14063*

Purpose of Disbursement

*Contribution*

Candidate Name

*Mark H. Thomas*

Category/Type

Amount of Each Disbursement this Period

*100.00*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State: *N.Y.*

District: *27*

Full Name (Last, First, Middle Initial)

**B.** *Erie County Association of Chiefs of Police*

Date of Disbursement

*07 23 2009*

Mailing Address

*P.O. Box 11*

City

*North Tonawanda*

State

*NY*

Zip Code

*14150*

Purpose of Disbursement

*Contribution*

Candidate Name

Category/Type

Amount of Each Disbursement this Period

*294.00*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

*On Request*

Full Name (Last, First, Middle Initial)

**C.** *Friends of Mark Schroeder*

Date of Disbursement

*07 27 2009*

Mailing Address

*P.O. Box 181*

City

*Budapest*

State

*NY*

Zip Code

*14220*

Purpose of Disbursement

*Contribution*

Candidate Name

*Mark H. Schroeder*

Category/Type

Amount of Each Disbursement this Period

*300.00*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

*NYS Assembly*

SUBTOTAL of Disbursements This Page (optional)

*694.00*

TOTAL This Period (last page this line number only)

*694.00*

**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 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)

*U.A. Plumbers & Steamfitters Local 70 PAC Inc*

Full Name (Last, First, Middle Initial)

A.

*J.A.L.M.C.*

Mailing Address

*P.O. Box 819*

City

*Jameson*

State

*NY*

Zip Code

*14702*

Purpose of Disbursement

*Annual Steak Fry*

Candidate Name

Category Type

Date of Disbursement

*07 27 2004*

Amount of Each Disbursement this Period

*2500*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

B.

*U.A. P.F.C.*

Mailing Address

*601 Massachusetts Av. N.W.*

City

*Washington*

State

*DC*

Zip Code

*20001*

Purpose of Disbursement

*Contribution*

Candidate Name

Category Type

Date of Disbursement

*07 27 2004*

Amount of Each Disbursement this Period

*1600.00*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

*PAC*

Full Name (Last, First, Middle Initial)

C.

*Elect Larry Bulman*

Mailing Address

*13 Myer Drive*

City

*South Cross Falls*

State

*NY*

Zip Code

*12902*

Purpose of Disbursement

*Contribution*

Candidate Name

*Larry S. Bulman*

Category Type

Date of Disbursement

*07 22 2004*

Amount of Each Disbursement this Period

*500.00*

Office Sought:

House

Senate

President

Disbursement For:

Primary

General

Other (specify) ▼

State:

District:

*Exp. Indus. Party Dist. Chair*

SUBTOTAL of Disbursements This Page (optional)

*2125.00*

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 3 OF 4

<input type="checkbox"/> 21a	<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"/> 29c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (BY/FOR)

*U.B. Plumbers & Steam Fitters Local 82, AFL-CIO*

Full Name (Last, First, Middle Initial)

A.

*Friends of Tom Butler*

Date of Disbursement

*09 / 03 / 2009*

Mailing Address

*P.O. Box 360*

City

*Lockport*

State

*NY*

Zip Code

*14095*

Purpose of Disbursement

*Contribution*

Candidate Name

*Tom Butler*

Category/Type

Amount of Each Disbursement this Period

*25000*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) *Special*

State:

District:

*Niagara County, NY*

Full Name (Last, First, Middle Initial)

B.

*Citizens for Sam Hoyt*

Date of Disbursement

*09 / 03 / 2009*

Mailing Address

*255 Delaware Ave*

City

*Buffalo*

State

*NY*

Zip Code

*14202*

Purpose of Disbursement

*Contribution*

Candidate Name

*Sam Hoyt*

Category/Type

Amount of Each Disbursement this Period

*10000*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) *Special*

State:

District:

*N.Y.S. 13th Dist.*

Full Name (Last, First, Middle Initial)

C.

*Local 82*

Date of Disbursement

*09 / 10 / 2009*

Mailing Address

*3451 W. Ferry Rd*

City

*Orchard Park*

State

*NY*

Zip Code

*14127*

Purpose of Disbursement

*Postage*

Candidate Name

Category/Type

Amount of Each Disbursement this Period

*415*

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) *Special*

State:

District:

SUBTOTAL of Disbursements This Page (optional)

*175415*

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 4 OF 7

<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)

*U.A. Pharoos + Steam Heat Local #2 PSC Inc*

Full Name (Last, First, Middle Initial)

A.

*Jack Davis for Congress*

Mailing Address

*P.O. Box 2004*

City

*Akron*

State

*NY*

Zip Code

*14001*

Purpose of Disbursement

*Contribution*

Candidate Name

*Jack Davis*

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *NY*

District: *26*

Date of Disbursement

*09* / *15* / *2009*

Amount of Each Disbursement This Period

*1000.00*

Full Name (Last, First, Middle Initial)

B.

*Brian Higgins for Congress*

Mailing Address

*P.O. Box 38*

City

*Baldwin*

State

*NY*

Zip Code

*14020*

Purpose of Disbursement

*Contribution*

Candidate Name

*Brian Higgins*

Category/Type

Office Sought:

House  
 Senate  
 President

Disbursement For:

Primary  General  
 Other (specify) ▼

State: *NY*

District: *27*

Date of Disbursement

*09* / *24* / *2009*

Amount of Each Disbursement This Period

*1000.00*

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

Purpose of Disbursement

Candidate Name

Category/Type

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)

*2000.00*

TOTAL This Period (last page this line number only)

*6573.15*

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 type="checkbox"/> USPS First Class Mail	Postmarked
<input checked="" type="checkbox"/> USPS Registered/Certified	Postmarked (R/C) 10-13-04
<input type="checkbox"/> USPS Priority Mail	Postmarked
	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
<i>SM</i> PREPARER	10-18-04 DATE PREPARED