

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
IUOE OPERATING ENGINEERS

ADDRESS (number and street) 1375 VIRGINIA DR.
 Check if different than previously reported. (ACC)
FT. WASHINGTON PA 19034

2. **FEC IDENTIFICATION NUMBER** C00136739
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:
 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 (12G)
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 01 01 2009 through 03 31 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 JAMES JAMES JONES

Signature of Treasurer Electronically Filed by JAMES JAMES JONES Date 04 03 2009

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. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name
IUOE OPERATING ENGINEERS

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>9</td></tr></table>	Y	Y	Y	Y	2	0	0	9		5104.23
Y	Y	Y	Y							
2	0	0	9							
(b) Cash on Hand at Beginning of Reporting Period	5104.23									
(c) Total Receipts (from Line 19)	41612.41	41612.41								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	46716.64	46716.64								
7. Total Disbursements (from Line 31)	39300.00	39300.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	7416.64	7416.64								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY 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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name
IUOE OPERATING ENGINEERS

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	0	9

 To:

M	M
0	3

D	D
3	1

Y	Y	Y	Y
2	0	0	9

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	0.00	0.00
(i) Itemized (use Schedule A)		
(ii) Unitemized	41612.41	41612.41
(iii) TOTAL (add Lines 11(a)(i) and (ii)	41612.41	41612.41
(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)	41612.41	41612.41
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
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	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	0.00
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))	41612.41	41612.41
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	41612.41	41612.41

DETAILED SUMMARY PAGE

of Disbursements

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
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.....	39300.00	39300.00
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))..	39300.00	39300.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	39300.00	39300.00

DETAILED SUMMARY PAGE
of Disbursements

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	41612.41	41612.41
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	41612.41	41612.41
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

**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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) 55TH 55TH WARD	Transaction ID: SB29.6188 Date of Disbursement MM / DD / YYYY 02 / 04 / 2009
	Mailing Address 3200 MAGEE AVE	Amount of Each Disbursement this Period 250.00
	City PHILADELPHIA State PA Zip Code 19149	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) BENSALEM BENSALEM TWP REP EX COMM	Transaction ID: SB29.6207 Date of Disbursement MM / DD / YYYY 03 / 03 / 2009
	Mailing Address 3271 OAKFORD RD.	Amount of Each Disbursement this Period 1000.00
	City TREVOSE State PA Zip Code 19053	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) BILL BILL DEWEESE CAMPAIGN COMM	Transaction ID: SB29.6173 Date of Disbursement MM / DD / YYYY 01 / 19 / 2009
	Mailing Address P.O. BOX 513	Amount of Each Disbursement this Period 500.00
	City HARRISBURG State PA Zip Code 17108	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1750.00
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 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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) BOB BOB CASEY FOR SENATE Mailing Address 3031 A WALTON RD City PLYMOUTH MEETING State PA Zip Code 19462 Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6209 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 3 / 2 0 0 9 Amount of Each Disbursement this Period 500.00
B.	Full Name (Last, First, Middle Initial) BRISTOL BRISTOL TWP DEMO COMM Mailing Address 32 CRIMSON KNG LN City LEVITTOWN State PA Zip Code 19055 Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6203 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 5 / 2 0 0 9 Amount of Each Disbursement this Period 1000.00
C.	Full Name (Last, First, Middle Initial) FRAN COMM TO ELECT FRAN SHIELDS Mailing Address 325 CHESTNUT ST STE 515 City PHILADELPHIA State PA Zip Code 19106 Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6200 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 9 Amount of Each Disbursement this Period 1000.00

SUBTOTAL of Disbursements This Page (optional) ▶	2500.00
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 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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
FRAN COMM TO ELECT FRAN SHIELDS

Mailing Address 325 CHESTNUT ST STE 515

City PHILADELPHIA State PA Zip Code 19106

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6248

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
JESSE COMM TO ELECT JESSE WHITE

Mailing Address P.O. BOX 384

City CECIL State PA Zip Code 15321

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6219

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
JOSEPH COMM TO ELECT JOE WATERS

Mailing Address 1518 WALNUT ST - STE 906

City PHILA. State PA Zip Code 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6224

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

1500.00

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 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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
BRISTOL COMM TO SERVICE BRISTOL FUTURE

Mailing Address 220 RADCLIFE ST

City BRISTOL State PA Zip Code 19017

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6205

Date of Disbursement

/

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
COSTA COSTA FOR STATE SENATE

Mailing Address 314 NEWPORT RD

City PITTSBURGH State PA Zip Code 15221

Purpose of Disbursement
CAMPAIGN CONTRI

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6217

Date of Disbursement

/

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
DEPASQUALE DEPASQUALE FOR THE 95TH

Mailing Address P.O. BOX 1822

City YORK State PA Zip Code 17415

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6228

Date of Disbursement

/

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements 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 12 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) RON DONATUCCI 2007 COMM <hr/> Mailing Address 1616 S. BROAD ST <hr/> City PHILA State PA Zip Code 19145 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6192 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 1 9 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) JAMES FIRM OF US TAX CONSULTANTS <hr/> Mailing Address 2801 MAXWELL ST. <hr/> City PHILA. State PA Zip Code 19136 <hr/> Purpose of Disbursement ACCOUNTANT Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6167 Date of Disbursement M M / D D / Y Y Y Y 0 1 / 1 5 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) BOB FRIENDS OF BOB BRADY <hr/> Mailing Address P.O. BOX 22646 <hr/> City PHILA. State PA Zip Code 19110 <hr/> Purpose of Disbursement CAMPAIGN CONTRI. Candidate Name Category/ Type <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.6185 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 0 9 <hr/> Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶	6300.00
TOTAL This Period (last page this line number only) ▶	[Empty Box]

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 / 24

<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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
BRIAN FRIENDS OF BRIAN O' NEILL

Mailing Address 2000 MARKET ST - 10TH FLOOR

City PHILA State PA Zip Code 19103

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6250

Date of Disbursement

03 / 25 / 2009

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
CALTAGIRONE FRIENDS OF CALTAGIRONE

Mailing Address 2521 HILL RD

City READING State PA Zip Code 19606

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6234

Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

300.00

C. Full Name (Last, First, Middle Initial)
CURTIS FRIENDS OF CURTIS JONES

Mailing Address 2243 W. ALLEGHANY AVE

City PHILADELPHIA State PA Zip Code 19132

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6187

Date of Disbursement

02 / 05 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ►

1800.00

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 14 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) JIM FRIENDS OF DA JIM GOODMAN	Transaction ID: SB29.6213
	Mailing Address 21 COTTAGE HILL W	Date of Disbursement MM / DD / YYYY 03 / 04 / 2009
	City POTTSVILLE State PA Zip Code 17901	Amount of Each Disbursement this Period 450.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

B.	Full Name (Last, First, Middle Initial) DENNY FRIENDS OF DENNY O'BRIEN	Transaction ID: SB29.6175
	Mailing Address P.O. BOX 16015	Date of Disbursement MM / DD / YYYY 01 / 19 / 2009
	City PHILA State PA Zip Code 19114	Amount of Each Disbursement this Period 1000.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

C.	Full Name (Last, First, Middle Initial) DON FRIENDS OF DON CUNNINGHAM	Transaction ID: SB29.6238
	Mailing Address P.O. BOX 644	Date of Disbursement MM / DD / YYYY 03 / 16 / 2009
	City BETHLEHEM State PA Zip Code 18016	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/ Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	▶	1950.00
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 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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
HARVIE/DENCE FRIENDS OF HARVIE & DENCE

Mailing Address 112 ELMWOOD RD

City FAIRLESS HILLS State PA Zip Code 19030

Purpose of Disbursement
CAMPAIGN CONTRI

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6241

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
JIM FRIENDS OF JIM LLOYD

Mailing Address 3033 WINDSON ST

City PHILA State PA Zip Code 19152

Purpose of Disbursement
CAMPAIGN CONTRI

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6246

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
JOE FRIENDS OF JOE MCGINN

Mailing Address 50 S. PROVIDENCE RD.

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6212

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements 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 16 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) MICHAEL FRIENDS OF MIKE GALLAGHER	Transaction ID: SB29.6183 Date of Disbursement MM / DD / YYYY 02 / 02 / 2009
	Mailing Address P.O. BOX 1613 1100 BYBERRY RD	Amount of Each Disbursement this Period 500.00
	City BENSLEM State PA Zip Code 19020	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
B.	Full Name (Last, First, Middle Initial) NEAL FRIENDS OF NEAL GOODMAN COMM	Transaction ID: SB29.6249 Date of Disbursement MM / DD / YYYY 03 / 25 / 2009
	Mailing Address P.O. BOX 5	Amount of Each Disbursement this Period 250.00
	City MAHANAY CITY State PA Zip Code 17948	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	
C.	Full Name (Last, First, Middle Initial) STEVE FRIENDS OF STEVE LUKACH	Transaction ID: SB29.6176 Date of Disbursement MM / DD / YYYY 01 / 10 / 2009
	Mailing Address 610 W. MARKET ST	Amount of Each Disbursement this Period 1000.00
	City POTTSVILLE State PA Zip Code 17906	
	Purpose of Disbursement CAMPAIGN CONTRI.	Category/Type
	Candidate Name	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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 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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
58TH WARD FRIENDS OF THE 58TH WARD

Mailing Address P.O. BOX 11524

City PHILA State PA Zip Code 19116

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6181

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
TOM FRIENDS OF TOM MCGARRIGLE

Mailing Address 115 W. STATE ST SUITE 300

City MEDIA State PA Zip Code 19063

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6166

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
VINCE FRIENDS OF VINCE GILLEN

Mailing Address 666 W. GERMANTOWN PIKE

City PLYMOUTH MEETING State PA Zip Code 19462

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6186

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements 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 18 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.	Full Name (Last, First, Middle Initial) CHRISTINE FRIENDS TO ELECT C TARTAGLIONE	Transaction ID: SB29.6237 Date of Disbursement
	Mailing Address 800 N 3RD STREET - 4TH FLR.	<input type="text" value="03"/> / <input type="text" value="12"/> / <input type="text" value="2009"/>
	City HARRISBURG State PA Zip Code 17102	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) GREENLEE GREENLEE FOR COUNCIL AT LARGE	Transaction ID: SB29.6227 Date of Disbursement
	Mailing Address 2932 OGDEN ST.	<input type="text" value="03"/> / <input type="text" value="05"/> / <input type="text" value="2009"/>
	City PHILA. State PA Zip Code 19130	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) GREENLEE GREENLEE FOR COUNCIL AT LARGE	Transaction ID: SB29.6243 Date of Disbursement
	Mailing Address 2932 OGDEN ST.	<input type="text" value="03"/> / <input type="text" value="16"/> / <input type="text" value="2009"/>
	City PHILA. State PA Zip Code 19130	Amount of Each Disbursement this Period
	Purpose of Disbursement CAMPAIGN CONTRI.	<input type="text" value="500.00"/>
	Candidate Name	Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1500.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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 19 / 24

<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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
JOHN JOHN GALLOWAY FOR STATE REP.

Mailing Address 221 YARDLEY AVE

City FALLSINGTON State PA Zip Code 19054

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6171

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
JOYCE JUDGE J. EVBAYS COURT COMM PL.

Mailing Address P.O. BOX 26489

City PHILADELPHIA State PA Zip Code 19140

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6197

Date of Disbursement

/ /

Amount of Each Disbursement this Period

500.00

C. Full Name (Last, First, Middle Initial)
JACK JUDGE J.PANELLA SUPREME CT

Mailing Address P.O. BOX 391

City HARRISBURG State PA Zip Code 17108

Purpose of Disbursement
CAMPAIGN COANTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.6244

Date of Disbursement

/ /

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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 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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
KANE KANE FOR JUDGE COMM.

Mailing Address 139 SOUTH MEADE RD

City State Zip Code
WILKES BARRE PA 18708

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6190
Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
KENNY KENNY FOR COUNCIL

Mailing Address P.O. BOX 60065

City State Zip Code
PHILA PA 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6202
Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
MARKOSEK MARKOSEK FOR STATE LEGISLATIVE

Mailing Address P.O. BOX 193

City State Zip Code
MONROEVILLE PA 15146

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6221
Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements 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 21 / 24

<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

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)
IUOE OPERATING ENGINEERS

A. Full Name (Last, First, Middle Initial)
MEEHAN MEEHAN FOR PENNSYLVANIA

Mailing Address P.O. BOX 58070

City PHILADELPHIA State PA Zip Code 19102

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6210

Date of Disbursement

03 / 04 / 2009

Amount of Each Disbursement this Period

300.00

B. Full Name (Last, First, Middle Initial)
MIDDLETOWN MIDDLETOWN UITED

Mailing Address 1565 W. MAPLE AVE

City LANGHORNE State PA Zip Code 19017

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6236

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

600.00

C. Full Name (Last, First, Middle Initial)
MONTGOMERY MONTGOMERY COUNTY DEMO COMM

Mailing Address 14W. MARSHALL ST.

City NORRISTOWN State PA Zip Code 19401

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2009 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.6174

Date of Disbursement

01 / 19 / 2009

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ▶

1400.00

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 22 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)
MONTGOMERY MONTGOMERY COUNTY DEMO COMM

Transaction ID: SB29.6240

Date of Disbursement

Mailing Address 14W. MARSHALL ST.

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	6		2	0	0	9

City NORRISTOWN State PA Zip Code 19401

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CAMPAIGN CONTRI.,

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
NIA NIA-PAC

Transaction ID: SB29.6168

Date of Disbursement

Mailing Address 1500 GARRETT RD

M	M	/	D	D	/	Y	Y	Y	Y
0	1		1	6		2	0	0	9

City UPPER DARBY State PA Zip Code 19082

Amount of Each Disbursement this Period

350.00

Purpose of Disbursement
CAMPAIGN CONTRI.

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
PLAN P.L.A.N

Transaction ID: SB29.6235

Date of Disbursement

Mailing Address 800 N. THIRD ST. 4TH FLR.

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

City HARRISBURG State PA Zip Code 17102

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
CAMPAIGN CONTRI

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2350.00

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 23 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)
BUINS RE-ELECT JUDGE BUINS

Transaction ID: SB29.6195

Date of Disbursement

Mailing Address ONE OXFORD VALLEY - STE 301

/

City LANGHORNE State PA Zip Code 19047

Amount of Each Disbursement this Period

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
REPUBLICAN REP. CITY COMM.

Transaction ID: SB29.6170

Date of Disbursement

Mailing Address 1700 BENJAMIN FRANKLIN PKWY
THE WINDSOR LOWER LEVEL

/

City PHILA State PA Zip Code 19103

Amount of Each Disbursement this Period

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
STERN STERN FOR ASSEMBLY

Transaction ID: SB29.6232

Date of Disbursement

Mailing Address P.O. BOX 312

/

City HOLIDAYSBURG State PA Zip Code 16645

Amount of Each Disbursement this Period

Purpose of Disbursement
CAMPAIGN CONTRI.

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements 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 24 / 24

<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

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)
IUOE OPERATING ENGINEERS

A.

Full Name (Last, First, Middle Initial)
UPPER DARBY UPPER DARBY REP. COMM

Transaction ID: SB29.6172

Date of Disbursement

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

Mailing Address 5035 TOWNSHIP LANE

Amount of Each Disbursement this Period

500.00

City DREXEL HILL State PA Zip Code 19026

Purpose of Disbursement
CAMPAIGN CONTRI.

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
WILLIAMS WILLIAMS FOR SENATE

Transaction ID: SB29.6182

Date of Disbursement

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

Mailing Address P.O. BOX 6313

Amount of Each Disbursement this Period

500.00

City PHILADELPHIA State PA Zip Code 19139

Purpose of Disbursement
CAMPAIGN CONTRI.

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2009
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

1000.00

TOTAL This Period (last page this line number only)

39300.00
