

**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

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

ADDRESS (number and street)

32-32 48TH AVENUE

☐Check if different  
than previously  
reported. (ACC)

LONG ISLAND CITY

NY

11101

2. **FEC IDENTIFICATION NUMBER**

CITY

STATE

ZIP CODE

C00386821

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

06

30

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 P ELDER

Signature of Treasurer

Electronically Filed by JAMES P ELDER

Date

07

30

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)

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Write or Type Committee Name

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

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

To:

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

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1 <span>2009</span>		749407.45
(b) Cash on Hand at Beginning of Reporting Period .....	749407.45	
(c) Total Receipts (from Line 19) .....	135004.17	135004.17
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	884411.62	884411.62
7. Total Disbursements (from Line 31) .....	153766.96	153766.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	730644.66	730644.66
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations owed <b>BY</b> 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**

FEC Form 3X (Rev. 06/2004)

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Write or Type Committee Name

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period:

From:

M	M	D	D	Y	Y	W	Y
0	1	0	1	2	0	0	9

To:

M	M	D	D	Y	Y	Y	Y
0	6	3	0	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 .....	133079.17	133079.17
(iii) TOTAL (add Lines 11(a)(i) and (ii) ..... ➤	133079.17	133079.17
(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) ..... ➤	133079.17	133079.17
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 .....	1925.00	1925.00
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)) .....	135004.17	135004.17
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	135004.17	135004.17

## DETAILED SUMMARY PAGE

of Disbursements

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FEC Form 3X (Rev. 02/2003)

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.....	28613.96	28613.96	
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ➤	28613.96	28613.96	
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00	
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	5000.00	5000.00	
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.....	120153.00	120153.00	
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))..	153766.96	153766.96	
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	153766.96	153766.96	

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

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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) .....	133079.17	133079.17
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	133079.17	133079.17
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	28613.96	28613.96
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	28613.96	28613.96

# **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)

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☐ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☒ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

RUBEN DIAZ FOR STATE SENATE

Mailing Address PO BOX 229

City

BRONX

State

NY

Zip Code

10460

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2008

☐ Primary  
☐ Other (specify) ▼

☒ General

Aggregate Year-to-Date ▼

1925.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 1 / 2 0 0 9

Transaction ID: SA16.7785

Amount of Each Receipt this Period

1925.00

REFUND OF PRIOR YEAR CONTRIBUTIONS

**SUBTOTAL** of Receipts This Page (optional) .....

1925.00

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

1925.00

# **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)

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

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINT

State  
NY

Zip Code  
11778

Purpose of Disbursement  
OFFICE EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7687

Date of Disbursement

01 / 02 / 2009

Amount of Each Disbursement this Period

1453.32

B.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINT

State  
NY

Zip Code  
11778

Purpose of Disbursement  
OFFICE EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7688

Date of Disbursement

02 / 17 / 2009

Amount of Each Disbursement this Period

677.38

C.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINT

State  
NY

Zip Code  
11778

Purpose of Disbursement  
OFFICE EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7689

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

901.65

SUBTOTAL of Disbursements This Page (optional) .....

3032.35

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)

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

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINT

State  
NY

Zip Code  
11778

Purpose of Disbursement  
OFFICE EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7690

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

1418.97

B.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Mailing Address 75 ROCKY POINT YAPHANK RD

City  
ROCKY POINT

State  
NY

Zip Code  
11778

Purpose of Disbursement  
OFFICE EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7691

Date of Disbursement

05 / 11 / 2009

Amount of Each Disbursement this Period

1585.46

C.

Full Name (Last, First, Middle Initial)

MULLIGAN & GROTE CPA PC

Mailing Address 131 TULIP AVE

City  
FLORAL PARK

State  
NY

Zip Code  
11001

Purpose of Disbursement  
PROFESSIONAL SERVICES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21B.7713

Date of Disbursement

05 / 05 / 2009

Amount of Each Disbursement this Period

19000.00

SUBTOTAL of Disbursements This Page (optional) .....

22004.43

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)

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

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

RISTORANTE LA PERLA OF WASHINGTON

Mailing Address 2000 PENNSYLVANIA AVE NW

City WASHINGTON State DC Zip Code 20037

Purpose of Disbursement  
MEETING EXPENSES

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7743

Date of Disbursement

06 / 09 / 2009

Amount of Each Disbursement this Period

2986.00

**B.**

Full Name (Last, First, Middle Initial)

UNION SOLIDARITY GRAPHICS

Mailing Address 48-09 34TH ST

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
PRINTING EXPENSES ENVELOPES ETC

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7767

Date of Disbursement

04 / 17 / 2009

Amount of Each Disbursement this Period

384.73

**C.**

Full Name (Last, First, Middle Initial)

UNION SOLIDARITY GRAPHICS

Mailing Address 48-09 34TH ST

City LONG ISLAND CITY State NY Zip Code 11101

Purpose of Disbursement  
PRINTING EXPENSES ENVELOPES ETC

Candidate Name

001  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB21B.7769

Date of Disbursement

04 / 28 / 2009

Amount of Each Disbursement this Period

157.14

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

3527.87

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

28564.65

# **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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) ACKERMAN FOR CONGRESS	<b>Transaction ID:</b> SB23.7573 <b>Date of Disbursement</b>
Mailing Address PO BOX 95	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 9</div> </div>
City FRESH MEADOWS State NY Zip Code 11365	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>2000.00</div>
Candidate Name ACKERMAN FOR CONGRESS	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) CROWLEY FOR CONGRESS	<b>Transaction ID:</b> SB23.7605 <b>Date of Disbursement</b>
Mailing Address 50 EAST ST SUITE 1	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 9</div> </div>
City WASHINGTON State DC Zip Code 20002	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>500.00</div>
Candidate Name CROWLEY FOR CONGRESS	<div>011</div> <div>Category/Type</div>
Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District:	
<b>C.</b> Full Name (Last, First, Middle Initial) NYS DEMOCRATIC COMM FEDERAL PAC	<b>Transaction ID:</b> SB23.7731 <b>Date of Disbursement</b>
Mailing Address 461 PARK AVE SO 10TH FLOOR	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 1 / 2 0 0 9</div> </div>
City NEW YORK State NY Zip Code 10016	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>2500.00</div>
Candidate Name	<div>011</div> <div>Category/Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

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

5000.00

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

5000.00

# **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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

ABBATE FOR ASSEMBLY

Mailing Address PO BOX 280235

City  
BROOKLYN

State  
NY

Zip Code  
11228

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011

Category/  
Type

Candidate Name  
ABBATE FOR ASSEMBLY

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7572

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

ABBATE FOR ASSEMBLY

Mailing Address PO BOX 280235

City  
BROOKLYN

State  
NY

Zip Code  
11228

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011

Category/  
Type

Candidate Name  
ABBATE FOR ASSEMBLY

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7571

Date of Disbursement

04 / 28 / 2009

Amount of Each Disbursement this Period

250.00

C.

Full Name (Last, First, Middle Initial)

ANDREW CUOMO 2010

Mailing Address PO BOX 683

City  
NEW YORK

State  
NY

Zip Code  
10008

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011

Category/  
Type

Candidate Name  
ANDREW CUOMO 2010

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7576

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

1000.00

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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) ANDREW CUOMO 2010	<b>Transaction ID:</b> SB29.7575 <b>Date of Disbursement</b>
Mailing Address PO BOX 683	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 9</div> </div>
City NEW YORK State NY Zip Code 10008	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>5000.00</div>
Candidate Name ANDREW CUOMO 2010	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND	<b>Transaction ID:</b> SB29.7577 <b>Date of Disbursement</b>
Mailing Address 40 HOLDEN BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 9</div> </div>
City STATEN ISLAND State NY Zip Code 10314	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>850.00</div>
Candidate Name ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND	<b>Transaction ID:</b> SB29.7578 <b>Date of Disbursement</b>
Mailing Address 40 HOLDEN BLVD	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 7 / 2 0 0 9</div> </div>
City STATEN ISLAND State NY Zip Code 10314	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>150.00</div>
Candidate Name ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

6000.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<p><b>A.</b></p> <p>Full Name (Last, First, Middle Initial) ARROYO 2009</p> <hr/> <p>Mailing Address 895 BROADWAY 5TH FLOOR</p> <hr/> <p>City NEW YORK State NY Zip Code 10003</p> <hr/> <p>Purpose of Disbursement POLITICAL CONTRIBUTIONS</p> <p>Candidate Name ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.7579</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 8 / 2 0 0 9</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>300.00</div>
<p><b>B.</b></p> <p>Full Name (Last, First, Middle Initial) BENEDETTO FOR THE ASSEMBLY</p> <hr/> <p>Mailing Address 205 ST. PAUL AVENUE</p> <hr/> <p>City BRONX State NY Zip Code 10461</p> <hr/> <p>Purpose of Disbursement POLITICAL CONTRIBUTIONS</p> <p>Candidate Name ARROYO 2009</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.7580</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 5 / 2 0 0 9</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>400.00</div>
<p><b>C.</b></p> <p>Full Name (Last, First, Middle Initial) BENJAMIN FRANKLIN REFORM DEMOCRATS</p> <hr/> <p>Mailing Address 3050 FAIRFIELD AVE</p> <hr/> <p>City BRONX State NY Zip Code 10463</p> <hr/> <p>Purpose of Disbursement POLITICAL CONTRIBUTIONS</p> <p>Candidate Name BENJAMIN FOR NEW YORK</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President  Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p><b>Transaction ID:</b> SB29.7582</p> <p>Date of Disbursement  <div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 9</div> </div> </p> <hr/> <p>Amount of Each Disbursement this Period</p> <div>300.00</div>

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

1000.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) BRONX COUNTY GOP	<b>Transaction ID:</b> SB29.7756 <b>Date of Disbursement</b>																				
Mailing Address 1200 WATERS PLACE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		1	7		2	0	0	9												
City BRONX State NY Zip Code 10461	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<table border="1"> <tr> <td>450.00</td> </tr> </table>	450.00																			
450.00																					
Candidate Name	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) BRONX DEMO COUNY COMM	<b>Transaction ID:</b> SB29.7586 <b>Date of Disbursement</b>																				
Mailing Address 135 WESTCHESTER SQ	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>3</td><td></td><td>2</td><td>0</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		2	0		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		2	0		2	0	0	9												
City BRONX State NY Zip Code 10461	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<table border="1"> <tr> <td>750.00</td> </tr> </table>	750.00																			
750.00																					
Candidate Name BRONX DEMO COUNY COMM	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) BRONX DEMO COUNY COMM	<b>Transaction ID:</b> SB29.7585 <b>Date of Disbursement</b>																				
Mailing Address 135 WESTCHESTER SQ	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	9		2	0	0	9												
City BRONX State NY Zip Code 10461	<b>Amount of Each Disbursement this Period</b>																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00																			
1500.00																					
Candidate Name BRONX DEMO COUNY COMM	<table border="1"> <tr> <td>011</td> </tr> </table> Category/ Type	011																			
011																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

2700.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

BUILDING AND CONSTRUCTION TRADES PAC

Mailing Address 71 WEST 23RD ST

City  
NEW YORK

State  
NE

Zip Code  
10011

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7587

Date of Disbursement

02 / 06 / 2009

Amount of Each Disbursement this Period

1675.00

**B.**

Full Name (Last, First, Middle Initial)

BUILDING AND CONSTRUCTION TRADES PAC

Mailing Address 71 WEST 23RD ST

City  
NEW YORK

State  
NE

Zip Code  
10011

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7589

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

1675.00

**C.**

Full Name (Last, First, Middle Initial)

CAMPAIGN FOR A DEMOCRATIC LEGISLATURE

Mailing Address PO BOX 163

City  
HOLBROOK

State  
NY

Zip Code  
11471

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB29.7593

Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

1000.00

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

4350.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

CAMPAIGN FOR A DEMOCRATIC LEGISLATURE

Mailing Address PO BOX 163

City  
HOLBROOK

State  
NY

Zip Code  
11471

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7592

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

1500.00

**B.**

Full Name (Last, First, Middle Initial)

CHIPPEWA DEMOCRATIC CLUB

Mailing Address 1447 FERRIS PLACE

City  
BRONX

State  
NY

Zip Code  
10461

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7595

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

CITIZENS FOR CAMERON ALDEN

Mailing Address 122 MARILYN ST

City  
EAST ISLIP

State  
NY

Zip Code  
11730

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7597

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

300.00

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

2100.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) CITIZENS TO ELECT EDDINGTON	<b>Transaction ID:</b> SB29.7774 <b>Date of Disbursement</b>
Mailing Address P.O. BOX 49	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 6 / 2 0 0 9</div> </div>
City MEDFORD State NY Zip Code 11763	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>300.00</div>
Candidate Name	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>B.</b> Full Name (Last, First, Middle Initial) CRESPO FOR ASSEMBLY	<b>Transaction ID:</b> SB29.7600 <b>Date of Disbursement</b>
Mailing Address 1565 ODELL ST 4D	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 1 3 / 2 0 0 9</div> </div>
City BRONX State NY Zip Code 10462	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>400.00</div>
Candidate Name	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	
<b>C.</b> Full Name (Last, First, Middle Initial) CUSICK FOR ASSEMBLY	<b>Transaction ID:</b> SB29.7606 <b>Date of Disbursement</b>
Mailing Address 94 BENEDICT AVE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 1 0 / 2 0 0 9</div> </div>
City STATEN ISLAND State NY Zip Code 10304	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>450.00</div>
Candidate Name	<div>011</div> <div>Category/ Type</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	

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

1150.00

**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 PageFOR 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

DAVID WEPRIN 2009

Mailing Address 420 LEXINGTON AVE

City NEW YORK State NY Zip Code 10170

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7607

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 11 / 2009

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC COUNTY COMMITTEE

Mailing Address 126 BENEDICT ST

City STATEN ISLAND State NY Zip Code 10302

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7610

Date of Disbursement

M M / D D / Y Y Y Y  
05 / 06 / 2009

Amount of Each Disbursement this Period

1050.00

**C.**

Full Name (Last, First, Middle Initial)

DEMOCRATIC ORG OF QUEENS

Mailing Address 72-50 AUSTIN ST

City FOREST HILLS State NY Zip Code 11375

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7757

Date of Disbursement

M M / D D / Y Y Y Y  
01 / 12 / 2009

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) .....

1850.00

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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) DEMOCRATIC ORG OF THE COUNTY OF RICHMOND	<b>Transaction ID:</b> SB29.7758 <b>Date of Disbursement</b>																				
Mailing Address 24 CAMBRIA STREET	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>1</td><td></td><td>2</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	1		2	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	1		2	9		2	0	0	9												
City STATEN ISLAND State NY Zip Code 10305	Amount of Each Disbursement this Period																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<table border="1"> <tr> <td colspan="10">340.00</td> </tr> </table>	340.00																			
340.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>B.</b> Full Name (Last, First, Middle Initial) DIAZ 2009	<b>Transaction ID:</b> SB29.7611 <b>Date of Disbursement</b>																				
Mailing Address 820 BOYNTON AVE	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>6</td><td></td><td>1</td><td>7</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		1	7		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	6		1	7		2	0	0	9												
City BRONX State NY Zip Code 10473	Amount of Each Disbursement this Period																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<table border="1"> <tr> <td colspan="10">2000.00</td> </tr> </table>	2000.00																			
2000.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
<b>C.</b> Full Name (Last, First, Middle Initial) DILAN 2009	<b>Transaction ID:</b> SB29.7615 <b>Date of Disbursement</b>																				
Mailing Address PO BOX 3670-551	<table border="1"> <tr> <td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td> </tr> <tr> <td>0</td><td>4</td><td></td><td>0</td><td>9</td><td></td><td>2</td><td>0</td><td>0</td><td>9</td> </tr> </table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	9		2	0	0	9
M	M	/	D	D	/	Y	Y	Y	Y												
0	4		0	9		2	0	0	9												
City BROOKLYN State NY Zip Code 11237	Amount of Each Disbursement this Period																				
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<table border="1"> <tr> <td colspan="10">300.00</td> </tr> </table>	300.00																			
300.00																					
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				

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

2640.00

**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 20 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

DINAPOLI 2010

Mailing Address 928 BROADWAY

City  
NEW YORK

State  
NY

Zip Code  
10010

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7616

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)

FOLEY FOR SENATE

Mailing Address PO BOX 214

City  
FARMINGVILLE

State  
NY

Zip Code  
11728

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7617

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

FRANK PADAVAN REELECTION CAMPAIGN

Mailing Address PO BOX 260319

City  
BELLEROSSE

State  
NY

Zip Code  
11426

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7618

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) .....

1600.00

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 21 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS FOR THE ELECTION OF DEAN SKELOS

Mailing Address 31 ROXEN ROAD

City  
ROCKVILLE CENTE

State  
NY

Zip Code  
11570

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7620

Date of Disbursement

06 / 04 / 2009

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF ALEX GROMACK

Mailing Address 23 REGINALD DRIVE

City  
CONGERS

State  
NY

Zip Code  
10920

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7625

Date of Disbursement

01 / 13 / 2009

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF ANDREW RAIK

Mailing Address PO BOX 1483

City  
EAST ISLIP

State  
NY

Zip Code  
11731

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7626

Date of Disbursement

06 / 19 / 2009

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) .....

3800.00

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 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BILL PERKINS

Mailing Address PO BOX 1355

City  
MORNINGSIDE

State  
NY

Zip Code  
10026

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7630

Date of Disbursement

04 / 20 / 2009

Amount of Each Disbursement this Period

300.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BRIAN BEEDENBENDER

Mailing Address PO BOX 665

City  
FARMINGVILLE

State  
NY

Zip Code  
11738

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7633

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

300.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF BRIAN BEEDENBENDER

Mailing Address PO BOX 665

City  
FARMINGVILLE

State  
NY

Zip Code  
11738

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7632

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

300.00

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

900.00

**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 PageFOR LINE NUMBER:  
(check only one)

PAGE 23 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF CARL HEASTIS

Mailing Address 75 DOVE ST

City  
ALBANYState  
NYZip Code  
12210Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7634

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF CRAIG JOHNSON

Mailing Address 220 LAFAYETTE ST  
3RD FLOORCity  
NEW YORKState  
NYZip Code  
10012Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7635

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		1	5		2	0	0	9

Amount of Each Disbursement this Period

250.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF DAVID DENENBERG

Mailing Address 2818 MERRICK RD

City  
BELLMOREState  
NYZip Code  
10710Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7637

Date of Disbursement

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

Amount of Each Disbursement this Period

1750.00

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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF ED ROMAIN

Mailing Address 235 SWEEZY AVENUE

City RIVERHEAD State NY Zip Code 11901

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7639

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

400.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF GERSON

Mailing Address 57 MOTT ST  
#13

City NEW YORK State NY Zip Code 10013

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7624

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF GERSON

Mailing Address 57 MOTT ST  
#13

City NEW YORK State NY Zip Code 10013

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7622

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

200.00

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

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 25 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JACK EDDINGTON

Mailing Address PO BOX 1161

City MEDFORD State NY Zip Code 11763

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7644

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

450.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JANE BONNERS

Mailing Address PO BOX 295

City ROCKY POINT State NY Zip Code 11778

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7645

Date of Disbursement

04 / 09 / 2009

Amount of Each Disbursement this Period

225.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF JON COOPER COMM

Mailing Address PO BOX 1488

City HUNTINGTON State NY Zip Code 11743

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7649

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

500.00

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

1175.00

**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 26 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
FRIENDS OF KATE BROWNING

Mailing Address PO BOX 293

City SHIRLEY State NY Zip Code 11967

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7650

Date of Disbursement

03 / 10 / 2009

Amount of Each Disbursement this Period

250.00

**B.** Full Name (Last, First, Middle Initial)  
FRIENDS OF LYNDA C. NOWICKI

Mailing Address PO BOX 481

City ST. JAMES State NY Zip Code 11780

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7653

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

900.00

**C.** Full Name (Last, First, Middle Initial)  
FRIENDS OF LYNDA C. NOWICKI

Mailing Address PO BOX 481

City ST. JAMES State NY Zip Code 11780

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7651

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

300.00

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

1450.00

**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 27 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF MARTY GOLDEN

Mailing Address 9306 4TH AVE

City  
BROOKLYN

State  
NY

Zip Code  
11209

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7654

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF MICHAEL BENJAMIN

Mailing Address 1010 SHERMAN AVE

City  
BRONX

State  
NY

Zip Code  
10456

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7655

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

300.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF PETER SCHMIDT

Mailing Address 17 CEDAR ST

City  
MASSAPEQUA

State  
NY

Zip Code  
11758

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7657

Date of Disbursement

04 / 22 / 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)

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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

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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRIENDS OF STEVE LEVY

Mailing Address PO BOX 980

City  
BAYPORT

State  
NY

Zip Code  
11705

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7662

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

FRIENDS OF STEVE LEVY

Mailing Address PO BOX 980

City  
BAYPORT

State  
NY

Zip Code  
11705

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7661

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

2500.00

C.

Full Name (Last, First, Middle Initial)

FRIENDS OF TIM MAZZEI

Mailing Address 1650 SYCAMORE AVE

City  
BOHEMIA

State  
NY

Zip Code  
11716

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7665

Date of Disbursement

01 / 12 / 2009

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) .....

5400.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 29 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

FRIENDS OF TOM KLEINER

Mailing Address PO BOX 442

City  
PIERMONTState  
NYZip Code  
10968Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7663

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	2	7	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

FRIENDS OF TOM SUOZZI

Mailing Address 300 GARDEN CITY PLAZA  
SUITE 240City  
GARDEN CITYState  
NYZip Code  
11530Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7777

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	8	/	2	0	0	9

Amount of Each Disbursement this Period

10000.00

**C.**

Full Name (Last, First, Middle Initial)

FRIENDS OF TOM SUOZZI

Mailing Address 300 GARDEN CITY PLAZA  
SUITE 240City  
GARDEN CITYState  
NYZip Code  
11530Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7668

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	0	4	/	2	0	0	9

Amount of Each Disbursement this Period

4000.00

SUBTOTAL of Disbursements This Page (optional) .....

14500.00

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 30 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

FRINEDS OF TOM BARRAGA

Mailing Address 18 HIGHLAND AVE

City WEST ISLIP State NY Zip Code 11796

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7666

Date of Disbursement

05 / 08 / 2009

Amount of Each Disbursement this Period

250.00

B.

Full Name (Last, First, Middle Initial)

INDEPENDANCE PARTY

Mailing Address 740 VETERANS HIGHWAY

City HAUPPAUGE State NY Zip Code 11788

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7670

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

400.00

C.

Full Name (Last, First, Middle Initial)

ISRAEL FOR CONGRESS

Mailing Address PO BOX 777

City DEER PARK State NY Zip Code 11729

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7671

Date of Disbursement

06 / 15 / 2009

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional) .....

1650.00

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

<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"/> y 29	<input type="checkbox"/> 30b

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

350.00

State:  District:

1050.00

State:  District:

02 / 17 / 2009

1000.00

State:  District:

**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 32 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

LESKO FOR SUPERVISOR

Mailing Address PO BOX 324

City  
FARMINGVILLE

State  
NY

Zip Code  
11738

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7702

Date of Disbursement

05 / 13 / 2009

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

LINDSAY FOR LEGISLATOR

Mailing Address PO BOX 885

City  
HOLBROOK

State  
NY

Zip Code  
11741

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7704

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

500.00

**C.**

Full Name (Last, First, Middle Initial)

MALCOLM A SMITH FOR NEW YORK

Mailing Address 107 WASHINGTON AVE

City  
ALBANY

State  
NY

Zip Code  
12210

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2010  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7705

Date of Disbursement

05 / 21 / 2009

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)

PAGE 33 / 44

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

MCMANUS DEMOCRATIC ASSOC

Mailing Address 345 WEST 44TH ST

City  
NEW YORK

State  
NY

Zip Code  
10036

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7707

Date of Disbursement

05 / 05 / 2009

Amount of Each Disbursement this Period

600.00

B.

Full Name (Last, First, Middle Initial)

MICHAEL COHEN 2009

Mailing Address 115 WEST 30TH ST  
1213

City  
NEW YORK

State  
NY

Zip Code  
10001

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7708

Date of Disbursement

02 / 24 / 2009

Amount of Each Disbursement this Period

500.00

C.

Full Name (Last, First, Middle Initial)

MORRIS PARK COMMUNITY ASSOCIATION

Mailing Address 1824 BRONXDALE AVE

City  
BRONX

State  
NY

Zip Code  
10462

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7710

Date of Disbursement

01 / 15 / 2009

Amount of Each Disbursement this Period

340.00

SUBTOTAL of Disbursements This Page (optional) .....

1440.00

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 34 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

NADLER FOR CONGRESS

Mailing Address 32 UNION SQ EAST

City NEW YORK State NY Zip Code 10003

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7715

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

500.00

**B.**

Full Name (Last, First, Middle Initial)

NASSAU COUNTY CONSERVATIVE COMM

Mailing Address 30 PEERLESS DRIVE

City OYSTER BAY State NY Zip Code 11771

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7719

Date of Disbursement

01 / 26 / 2009

Amount of Each Disbursement this Period

400.00

**C.**

Full Name (Last, First, Middle Initial)

NASSAU COUNTY CONSERVATIVE COMM

Mailing Address 30 PEERLESS DRIVE

City OYSTER BAY State NY Zip Code 11771

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7717

Date of Disbursement

04 / 08 / 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 35 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

NASSAU COUNTY CONSERVATIVE COMM

Mailing Address 30 PEERLESS DRIVE

City  
OYSTER BAY

State  
NY

Zip Code  
11771

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7718

Date of Disbursement

04 / 08 / 2009

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

NASSAU COUNTY REPUBLICAN COMMITTEE

Mailing Address 164 POST AVE

City  
WESTBURY

State  
NY

Zip Code  
11590

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7720

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

350.00

C.

Full Name (Last, First, Middle Initial)

NEW YORK COUNTY DEMOCRATIC COMM

Mailing Address 461 PARK AVE  
10TH FLOOR

City  
NEW YORK

State  
NY

Zip Code  
10016

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7721

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

700.00

SUBTOTAL of Disbursements This Page (optional) .....

4050.00

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 36 / 44

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) <b>NEW YORKERS FOR HELEN DIANE FOSTER</b>	<b>Transaction ID:</b> SB29.7726 <b>Date of Disbursement</b>
Mailing Address 1000 GRAND COUCOURSE 4M	<div> <div>M M / D D / Y Y Y Y</div> <div>0 5 / 2 7 / 2 0 0 9</div> </div>
City BRONX State NY Zip Code 10461	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<div> <div>500.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>B.</b> Full Name (Last, First, Middle Initial) <b>NEW YORKERS FOR KLEIN</b>	<b>Transaction ID:</b> SB29.7728 <b>Date of Disbursement</b>
Mailing Address 3 RUTH PLACE	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 2 3 / 2 0 0 9</div> </div>
City GLEN HEAD State NY Zip Code 11545	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<div> <div>1000.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
<b>C.</b> Full Name (Last, First, Middle Initial) <b>NEW YORK FOR ESPADA</b>	<b>Transaction ID:</b> SB29.7723 <b>Date of Disbursement</b>
Mailing Address PO BOX 496	<div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 3 / 2 0 0 9</div> </div>
City BRONX State NY Zip Code 10458	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name	<div> <div>750.00</div> <div>011 Category/ Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	

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

**2250.00**

**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 37 / 44

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26  
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b> Full Name (Last, First, Middle Initial) NEW YORK STATE PIPE TRADES PAC	<b>Transaction ID:</b> SB29.7778 <b>Date of Disbursement</b>
Mailing Address PO BOX 1343	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 8 / 2 0 0 9</div> </div>
City SOUTH GLENS FALLS State NY Zip Code 12803	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>14974.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) NEW YORK STATE PIPE TRADES PAC	<b>Transaction ID:</b> SB29.7725 <b>Date of Disbursement</b>
Mailing Address PO BOX 1343	<div> <div>M M / D D / Y Y Y Y</div> <div>0 6 / 0 9 / 2 0 0 9</div> </div>
City SOUTH GLENS FALLS State NY Zip Code 12803	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>14974.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) NORTH SHORE DEMOCRATIC CLUB	<b>Transaction ID:</b> SB29.7729 <b>Date of Disbursement</b>
Mailing Address 72 CROSSHELL ST	<div> <div>M M / D D / Y Y Y Y</div> <div>0 4 / 0 9 / 2 0 0 9</div> </div>
City STATEN ISLAND State NY Zip Code 10301	Amount of Each Disbursement this Period
Purpose of Disbursement POLITICAL CONTRIBUTIONS	<div>510.00</div>
Candidate Name	<div>011</div> Category/ Type
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2009 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

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

**30458.00**

**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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR LEROY COMRIE

Mailing Address 305 BROADWAY

City State Zip Code  
NEW YORK NY 10007

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7733

Date of Disbursement

04 / 29 / 2009

Amount of Each Disbursement this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
PEOPLE FOR PEREZ

Mailing Address PO BOX 580580  
MT CARMEL STA

City State Zip Code  
BRONX NY 10548

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7779

Date of Disbursement

01 / 06 / 2009

Amount of Each Disbursement this Period

250.00

**C.** Full Name (Last, First, Middle Initial)  
PETE KING FOR CONGRESS

Mailing Address 1225 FRANKLIN AVENUE

City State Zip Code  
GARDEN CITY NY 11530

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7734

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

500.00

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

1050.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

RC GOP

Mailing Address 3 HANSEN AVENUE

City  
NEW CITY

State  
NY

Zip Code  
10956

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7735

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

1500.00

B.

Full Name (Last, First, Middle Initial)

RC GOP

Mailing Address 3 HANSEN AVENUE

City  
NEW CITY

State  
NY

Zip Code  
10956

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7736

Date of Disbursement

03 / 24 / 2009

Amount of Each Disbursement this Period

2900.00

C.

Full Name (Last, First, Middle Initial)

REELECT COUNCILMAN KEN MITCHELL

Mailing Address 66 ARNOLD ST

City  
STATEN ISLAND

State  
NY

Zip Code  
10301

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7737

Date of Disbursement

06 / 03 / 2009

Amount of Each Disbursement this Period

875.00

SUBTOTAL of Disbursements This Page (optional) .....

5275.00

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 PageFOR LINE NUMBER:  
(check only one)

PAGE 40 / 44

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

RIDGEWOOD DEMOCRATIC CLUB

Mailing Address 60-70 PUTNAM AVENUE

City  
RIDGEWOODState  
NYZip Code  
11385Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7741

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5	/	1	4	/	2	0	0	9

Amount of Each Disbursement this Period

675.00

**B.**

Full Name (Last, First, Middle Initial)

RUTH HASSELL-THOMPSON 09

Mailing Address PO BOX 154

City  
MOUNT VERNONState  
NYZip Code  
10522Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7746

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	9

Amount of Each Disbursement this Period

750.00

**C.**

Full Name (Last, First, Middle Initial)

SAVINO FOR NEW YORK

Mailing Address 481 EIGHTH AVE

City  
NEW YORKState  
NYZip Code  
10001Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

  
Category/  
Type
Office Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7748

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	5	/	2	0	0	9

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) .....

1925.00

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)

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☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
SAWICKI FOR COMPTROLLERS

Mailing Address PO BOX 763

City CUTCHOQUE State NY Zip Code 11935

Purpose of Disbursement  
POLITICAL CONTRIBUTION

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7751

Date of Disbursement

01 / 19 / 2009

Amount of Each Disbursement this Period

300.00

**B.** Full Name (Last, First, Middle Initial)  
SAWICKI FOR COMPTROLLERS

Mailing Address PO BOX 763

City CUTCHOQUE State NY Zip Code 11935

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7750

Date of Disbursement

05 / 27 / 2009

Amount of Each Disbursement this Period

375.00

**C.** Full Name (Last, First, Middle Initial)  
STEVE ISRAEL FOR CONGRESS

Mailing Address PO BOX 777

City DEER PARK State NY Zip Code 11729

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

State: District:

Transaction ID: SB29.7752

Date of Disbursement

03 / 05 / 2009

Amount of Each Disbursement this Period

1000.00

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

1675.00

**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 PageFOR 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

STEWART 2009

Mailing Address 4016 CHURCH AVE

City State Zip Code  
BROOKLYN NY 11203Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7753

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 20 / 2009

Amount of Each Disbursement this Period

240.00

**B.**

Full Name (Last, First, Middle Initial)

SUFFOLK COUNTY CONSERVATIVE CHAIRMANS COMM

Mailing Address PO BOX 100

City State Zip Code  
BAYPORT NY 11705Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7754

Date of Disbursement

M M / D D / Y Y Y Y  
03 / 20 / 2009

Amount of Each Disbursement this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

SUFFOLK COUNTY REPUBLICAN COMMITTEE

Mailing Address 3340 VETERANS MEMORIAL HIGHWAY

City State Zip Code  
BOHEMIA NY 11716Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
TypeOffice Sought: ☐ House ☐ Senate ☐ President  
Disbursement For: 2009 ☐ Primary ☒ General ☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7755

Date of Disbursement

M M / D D / Y Y Y Y  
06 / 15 / 2009

Amount of Each Disbursement this Period

700.00

SUBTOTAL of Disbursements This Page (optional) .....

1940.00

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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☒ House ☐ Senate ☐ President  
State: NY District: 01  
Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

Transaction ID: SB29.7760

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

400.00

**B.** Full Name (Last, First, Middle Initial)  
TOM SPODA FOR DISTRICT ATTORNEY

Mailing Address PO BOX 883

City BABYLON State NY Zip Code 11702

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

Transaction ID: SB29.7761

Date of Disbursement

01 / 29 / 2009

Amount of Each Disbursement this Period

500.00

**C.** Full Name (Last, First, Middle Initial)  
TOM SPODA FOR DISTRICT ATTORNEY

Mailing Address PO BOX 883

City BABYLON State NY Zip Code 11702

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

Transaction ID: SB29.7762

Date of Disbursement

06 / 26 / 2009

Amount of Each Disbursement this Period

1000.00

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

1900.00

**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)

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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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.**

Full Name (Last, First, Middle Initial)

TOWN OF OYSTER BAY REPUB COMM

Mailing Address 164 POST AVE

City  
WESTBURY

State  
NY

Zip Code  
11590

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7765

Date of Disbursement

03 / 12 / 2009

Amount of Each Disbursement this Period

450.00

**B.**

Full Name (Last, First, Middle Initial)

WOOD-HEIGHTS DEMOCRATIC CLUB

Mailing Address 73-12 35TH AVE

City  
JACKSON HEIGHTS

State  
NY

Zip Code  
11372

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2009  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB29.7770

Date of Disbursement

03 / 20 / 2009

Amount of Each Disbursement this Period

325.00

SUBTOTAL of Disbursements This Page (optional) .....

775.00

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

117203.00