

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name
IBEW-LU 313 PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		14459.03
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	27031.32									
(c) Total Receipts (from Line 19)	0.00	13672.29								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27031.32	28131.32								
7. Total Disbursements (from Line 31)	12224.00	13324.00								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	14807.32	14807.32								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
IBEW-LU 313 PAC

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	0.00	13644.29
(iii) TOTAL (add Lines 11(a)(i) and (ii)	0.00	13644.29
(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)	0.00	13644.29
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	0.00	28.00
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))	0.00	13672.29
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	0.00	13672.29

DETAILED SUMMARY PAGE

of Disbursements

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.....	0.00	0.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	0.00	0.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	12200.00	13300.00
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.....	24.00	24.00
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))..	12224.00	13324.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	12224.00	13324.00

DETAILED SUMMARY PAGE
of Disbursements

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3	0.00	13644.29
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	0.00	13644.29
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	0.00	0.00
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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)
IBEW-LU 313 PAC

A.

Full Name (Last, First, Middle Initial)
Committee to elect Brad Bennett

Transaction ID: SB23.4176
Date of Disbursement

Mailing Address P.O. Box 344

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	0

City Dover State DE Zip Code 19903

Amount of Each Disbursement this Period

Purpose of Disbursement

200.00

Candidate Name

Category/
Type

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

B.

Full Name (Last, First, Middle Initial)
Committee to elect James Johnson

Transaction ID: SB23.4170
Date of Disbursement

Mailing Address P.O. Box 22

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	0

City New Castle State DE Zip Code 19720

Amount of Each Disbursement this Period

Purpose of Disbursement

200.00

Candidate Name

Category/
Type

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

C.

Full Name (Last, First, Middle Initial)
Committee to elect Mike Annone

Transaction ID: SB23.4182
Date of Disbursement

Mailing Address 2210 Greenstone Rd

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	8		2	0	1	0

City Wilmington State DE Zip Code 19810

Amount of Each Disbursement this Period

Purpose of Disbursement

350.00

Candidate Name

Category/
Type

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

SUBTOTAL of Disbursements This Page (optional)

750.00

TOTAL This Period (last page this line number only)

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SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IBEW-LU 313 PAC

A.	Full Name (Last, First, Middle Initial) Committee to elect Mike Annone Mailing Address 2210 Greenstone Rd City Wilmington State DE Zip Code 19810 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4194 Date of Disbursement <input type="text" value="06"/> / <input type="text" value="24"/> / <input type="text" value="2010"/> Amount of Each Disbursement this Period <input type="text" value="250.00"/>
B.	Full Name (Last, First, Middle Initial) Committee to re-elect Dave McBride Mailing Address 7 Nicole Court - Hawk's Nest City New Castle State DE Zip Code 19720 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4167 Date of Disbursement <input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2010"/> Amount of Each Disbursement this Period <input type="text" value="400.00"/>
C.	Full Name (Last, First, Middle Initial) Delaware Democratic Chairman's Club Mailing Address 19 E. Commons Blvd. City New Castle State DE Zip Code 19720 Purpose of Disbursement <input type="text"/> Candidate Name <input type="text"/> Category/Type <input type="text"/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4169 Date of Disbursement <input type="text" value="04"/> / <input type="text" value="08"/> / <input type="text" value="2010"/> Amount of Each Disbursement this Period <input type="text" value="7500.00"/>

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="8150.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

Use separate schedule(s) for each category of the Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IBEW-LU 313 PAC

A.	Full Name (Last, First, Middle Initial) Democrats 2010 <hr/> Mailing Address P.O. Box 2065 <hr/> City Wilmington State DE Zip Code 19899 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4197 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 4 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <input type="text" value="250.00"/>
B.	Full Name (Last, First, Middle Initial) Friends of Bob Walls <hr/> Mailing Address 11 Horseshoe Drive <hr/> City Milford State DE Zip Code 19963 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4174 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <input type="text" value="200.00"/>
C.	Full Name (Last, First, Middle Initial) Friends of Darryl Scott <hr/> Mailing Address 73 Greentree Dr Box 415 <hr/> City Dover State DE Zip Code 19904 <hr/> Purpose of Disbursement <input type="text"/> <hr/> Candidate Name <input type="text"/> Category/Type <input type="text"/> <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB23.4180 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 8 / 2 0 1 0 <hr/> Amount of Each Disbursement this Period <input type="text" value="200.00"/>

SUBTOTAL of Disbursements This Page (optional) ▶	<input type="text" value="650.00"/>
TOTAL This Period (last page this line number only) ▶	<input type="text"/>

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
IBEW-LU 313 PAC

A.	Full Name (Last, First, Middle Initial) Friends of Mike Barbieri	Transaction ID: SB23.4184 Date of Disbursement
	Mailing Address 88 Iroquois Court	<input type="text" value="04"/> <input type="text" value="08"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Newark State DE Zip Code 19720	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Friends of Paul G Clark	Transaction ID: SB23.4188 Date of Disbursement
	Mailing Address 209 Meadowdale Dr.	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Newark State DE Zip Code 19711	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="250.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Friends of terry Schooley	Transaction ID: SB23.4186 Date of Disbursement
	Mailing Address 2 Chaple Hill Dr.	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="10"/>
	City Newark State DE Zip Code 19711	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="200.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="650.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 10 / 11

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

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NAME OF COMMITTEE (In Full)
IBEW-LU 313 PAC

<p>A. Full Name (Last, First, Middle Initial) Martin A Wilson Sr. Re-election Committee</p> <p>Mailing Address 611 N. Van Buren St</p> <p>City Wilmington State DE Zip Code 19805</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4192 Date of Disbursement 05 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>B. Full Name (Last, First, Middle Initial) People for Brady</p> <p>Mailing Address 1804 Shallcross Ave</p> <p>City Wilmington State DE Zip Code 19806</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4178 Date of Disbursement 04 / 08 / 2010</p> <p>Amount of Each Disbursement this Period 400.00</p>
<p>C. Full Name (Last, First, Middle Initial) People for Maravelias</p> <p>Mailing Address 2110 White Oak Rd</p> <p>City Dover State DE Zip Code 19901</p> <p>Purpose of Disbursement <input type="text"/></p> <p>Candidate Name <input type="text"/> Category/Type <input type="text"/></p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB23.4195 Date of Disbursement 06 / 24 / 2010</p> <p>Amount of Each Disbursement this Period 600.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1600.00

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

