

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
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
880 PA

ADDRESS (number and street) 12298 Townsend Road
 Check if different than previously reported. (ACC)
Philadelphia PA 19154

2. **FEC IDENTIFICATION NUMBER** C00174847
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 2011 through 06 30 2011

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 Mr. Daniel H. Grace

Signature of Treasurer Electronically Filed by Mr. Daniel H. Grace Date 07 20 2011

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									
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FEC FORM 3X
(Rev. 12/2004)

SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS

Write or Type Committee Name

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>X</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	X	Y	Y	Y	2	0	1	1		190676.95
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	190676.95									
(c) Total Receipts (from Line 19)	37668.62	37668.62								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	228345.57	228345.57								
7. Total Disbursements (from Line 31)	42200.30	42200.30								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	186145.27	186145.27								
9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D)	0.00									
10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D)	0.00									

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

Report Covering the Period: From:

M	M
0	1

D	D
0	1

Y	Y	Y	Y
2	0	1	1

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	1

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	37665.75	37665.75
(iii) TOTAL (add Lines 11(a)(i) and (ii)	37665.75	37665.75
(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)	37665.75	37665.75
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.)	2.87	2.87
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))	37668.62	37668.62
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	37668.62	37668.62

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.....	11824.30	11824.30
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	11824.30	11824.30
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	500.00	500.00
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.....	29876.00	29876.00
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))..	42200.30	42200.30
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	42200.30	42200.30

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)	37665.75	37665.75
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	37665.75	37665.75
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	11824.30	11824.30
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	11824.30	11824.30

**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 6 / 20

<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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Novak Francella LLC	Transaction ID: SB21B.4893 Date of Disbursement 02 / 02 / 2011
	Mailing Address One Presidential Blvd Suite 330	Amount of Each Disbursement this Period 2000.00
	City Bala Cynwyd State PA Zip Code 19004	
	Purpose of Disbursement Audit services	Category/Type
	Candidate Name	
	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) Novak Francella LLC	Transaction ID: SB21B.4905 Date of Disbursement 02 / 23 / 2011
	Mailing Address One Presidential Blvd Suite 330	Amount of Each Disbursement this Period 3000.00
	City Bala Cynwyd State PA Zip Code 19004	
	Purpose of Disbursement Audit services	Category/Type
	Candidate Name	
	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) Teamsters Local Union No. 830	Transaction ID: SB21B.4889 Date of Disbursement 01 / 13 / 2011
	Mailing Address 12298 Townsend Road	Amount of Each Disbursement this Period 204.80
	City Philadelphia State PA Zip Code 19154	
	Purpose of Disbursement Reimbursement for DRIVE admin work-12/10	Category/Type
	Candidate Name	
	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)	5204.80
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input 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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Teamsters Local Union No. 830 Mailing Address 12298 Townsend Road City Philadelphia State PA Zip Code 19154 Purpose of Disbursement Reimbursement for DRIVE admin work - 1/11 Candidate Name 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) ▼	Transaction ID: SB21B.4894 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 0 2 / 2 0 1 1	Amount of Each Disbursement this Period 716.59
B.	Full Name (Last, First, Middle Initial) Teamsters Local Union No. 830 Mailing Address 12298 Townsend Road City Philadelphia State PA Zip Code 19154 Purpose of Disbursement Reimbursement for DRIVE admin work-2/11 Candidate Name 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) ▼	Transaction ID: SB21B.4909 Date of Disbursement M M / D D / Y Y Y Y 0 3 / 0 2 / 2 0 1 1	Amount of Each Disbursement this Period 499.44
C.	Full Name (Last, First, Middle Initial) Teamsters Local Union No. 830 Mailing Address 12298 Townsend Road City Philadelphia State PA Zip Code 19154 Purpose of Disbursement Reimbursement for DRIVE admin work-3/11 Candidate Name 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) ▼	Transaction ID: SB21B.4927 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 2 0 / 2 0 1 1	Amount of Each Disbursement this Period 629.73

SUBTOTAL of Disbursements This Page (optional)	1845.76
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER: (check only one)

<input 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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Teamsters Local Union No. 830	Transaction ID: SB21B.4944 Date of Disbursement
	Mailing Address 12298 Townsend Road	<input type="text" value="05"/> <input type="text" value="04"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Philadelphia State PA Zip Code 19154	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for DRIVE admin work-4/11	<input type="text" value="456.01"/>
	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) Teamsters Local Union No. 830	Transaction ID: SB21B.4960 Date of Disbursement
	Mailing Address 12298 Townsend Road	<input type="text" value="06"/> <input type="text" value="02"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Philadelphia State PA Zip Code 19154	Amount of Each Disbursement this Period
	Purpose of Disbursement Reimbursement for DRIVE admin work-5/11	<input type="text" value="629.73"/>
	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) U. S. Treasury	Transaction ID: SB21B.4979 Date of Disbursement
	Mailing Address Roosevelt Blvd	<input type="text" value="03"/> <input type="text" value="03"/> / <input type="text" value="20"/> <input type="text" value="11"/>
	City Philadelphia State PA Zip Code 19154	Amount of Each Disbursement this Period
	Purpose of Disbursement Tax due on Form 1120-POL	<input type="text" value="3558.00"/>
	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="4643.74"/>
TOTAL This Period (last page this line number only)	<input type="text" value="11694.30"/>

**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 9 / 20

<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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Bob Casey for Senate		Transaction ID: SB23.4917	
	Mailing Address P.O. Box 58746		Date of Disbursement MM / DD / YYYY 03 / 09 / 2011	
	City Philadelphia	State PA	Zip Code 19102	Amount of Each Disbursement this Period 500.00
	Purpose of Disbursement Fundraiser tickets		Category/ Type	
	Candidate Name Bob Casey for Senate			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2012 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
	State:	District:		

SUBTOTAL of Disbursements This Page (optional)

500.00

TOTAL This Period (last page this line number only)

500.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) 12th Ward Leader of the Democratic Party	Transaction ID: SB29.4925 Date of Disbursement
	Mailing Address 5138 Knox Street	<input type="text" value="03"/> / <input type="text" value="30"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19144	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<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) ▼

B.	Full Name (Last, First, Middle Initial) Bobby 11	Transaction ID: SB29.4910 Date of Disbursement
	Mailing Address P.O. Box 65743	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19155	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="1000.00"/>
	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) Bobby 11	Transaction ID: SB29.4948 Date of Disbursement
	Mailing Address P.O. Box 65743	<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19155	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<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) ▼

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

<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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

<p>A.</p> <p>Full Name (Last, First, Middle Initial) Bucks County Democratic Committee</p> <p>Mailing Address 10 E. Court Street</p> <p>City Doylestown State PA Zip Code 18901</p> <p>Purpose of Disbursement Fundraiser tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.4949</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="1"/> <input type="text" value="8"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) Citizens to Elect Mike O'Brien</p> <p>Mailing Address 714 N 3rd Street</p> <p>City Philadelphia State PA Zip Code 19123</p> <p>Purpose of Disbursement Contribution</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.4933</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="500.00"/></p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) Committee to Elect Christine Solomon Traffic Court Judge</p> <p>Mailing Address 7055 Dorcas Street</p> <p>City Philadelphia State PA Zip Code 19111</p> <p>Purpose of Disbursement Fundraiser tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.4939</p> <p>Date of Disbursement</p> <p><input type="text" value="0"/> <input type="text" value="5"/> / <input type="text" value="0"/> <input type="text" value="4"/> / <input type="text" value="2"/> <input type="text" value="0"/> <input type="text" value="1"/> <input type="text" value="1"/></p> <p>Amount of Each Disbursement this Period</p> <p><input type="text" value="250.00"/></p>

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

<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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Committee to Elect Frederick C Mari for Judge	Transaction ID: SB29.4891 Date of Disbursement
	Mailing Address 3417 Friendship Street	<input type="text" value="02"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19149	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="600.00"/>
	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) Committee to Elect Frederick C Mari for Judge	Transaction ID: SB29.4915 Date of Disbursement
	Mailing Address 3417 Friendship Street	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19149	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="500.00"/>
	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) Democratic Campaign Committee of Philadelphia	Transaction ID: SB29.4942 Date of Disbursement
	Mailing Address 1421 Walnut Street	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="750.00"/>
	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="1850.00"/>
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 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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Firends of Tina Davis	Transaction ID: SB29.4913 Date of Disbursement
	Mailing Address 3019 West Avenue	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Bristol State PA Zip Code 19007	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="500.00"/>
	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 Brian O'Neill	Transaction ID: SB29.4912 Date of Disbursement
	Mailing Address 15209 Bernita Drive	<input type="text" value="03"/> / <input type="text" value="09"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19116	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="1000.00"/>
	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 Curtis Jones Jr	Transaction ID: SB29.4888 Date of Disbursement
	Mailing Address 100 S, Broad Street Suite 1530	<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19110	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser donation	<input type="text" value="1000.00"/>
	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="2500.00"/>
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 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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Friends of Jim Divergillis	Transaction ID: SB29.4928 Date of Disbursement
	Mailing Address 4414 Kensington Avenue	<input type="text" value="04"/> / <input type="text" value="27"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19134	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="500.00"/>
	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 Jim Divergillis	Transaction ID: SB29.4947 Date of Disbursement
	Mailing Address 4414 Kensington Avenue	<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19134	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<input type="text" value="10000.00"/>
	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 Joe Duda	Transaction ID: SB29.4941 Date of Disbursement
	Mailing Address 11821 Brandon Road	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19154	Amount of Each Disbursement this Period
	Purpose of Disbursement Contribution	<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) ▼

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="10750.00"/>
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 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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A. Full Name (Last, First, Middle Initial) Friends of Lansdale <hr/> Mailing Address P.O. Box 1191 <hr/> City Lansdale State PA Zip Code 19446 <hr/> Purpose of Disbursement Contribution Candidate Name <hr/> 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) ▼	Transaction ID: SB29.4956 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Friends of Lower Southampton <hr/> Mailing Address 538 E. Myrtle Avenue <hr/> City Trevoese State PA Zip Code 19053 <hr/> Purpose of Disbursement Fundraiser tickets Candidate Name <hr/> 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) ▼	Transaction ID: SB29.4901 Date of Disbursement M M / D D / Y Y Y Y 0 2 / 2 3 / 2 0 1 1
	Amount of Each Disbursement this Period 1000.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Friends of Mike Fanning <hr/> Mailing Address P.O. Box 63256 <hr/> City Philadelphia State PA Zip Code 19114 <hr/> Purpose of Disbursement Fundraiser tickets Candidate Name <hr/> 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) ▼	Transaction ID: SB29.4945 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 0 5 / 2 0 1 1
	Amount of Each Disbursement this Period 600.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.

Full Name (Last, First, Middle Initial)
Friends of the 58th Ward

Mailing Address 1128 Morefield Road

City Philadelphia State PA Zip Code 19115

Purpose of Disbursement
Fundraiser tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4932

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

500.00

B.

Full Name (Last, First, Middle Initial)
Green for Philadelphia

Mailing Address P.O. Box 58247

City Philadelphia State PA Zip Code 19102

Purpose of Disbursement
Fundraiser tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4930

Date of Disbursement

05 / 02 / 2011

Amount of Each Disbursement this Period

1000.00

C.

Full Name (Last, First, Middle Initial)
Greenlee for Council at Large

Mailing Address 2932 Ogden Street

City Philadelphia State PA Zip Code 19130

Purpose of Disbursement
Fundraiser tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4936

Date of Disbursement

05 / 04 / 2011

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1750.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

PAGE 17 / 20

<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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) HRCC, Inc	Transaction ID: SB29.4895 Date of Disbursement 02 / 09 / 2011
	Mailing Address 442 N. President Avenue	Amount of Each Disbursement this Period 1000.00
	City Lancaster State PA Zip Code 17603	Category/ Type
	Purpose of Disbursement Fundraiser tickets Candidate Name	
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) Joe O'Neill for Judge	Transaction ID: SB29.4938 Date of Disbursement 05 / 04 / 2011
	Mailing Address 1339 Chestnut Street Suite 580	Amount of Each Disbursement this Period 250.00
	City Philadelphia State PA Zip Code 19107	Category/ Type
	Purpose of Disbursement Fundraiser tickets Candidate Name	
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) Keep Dan Finello Our District Judge	Transaction ID: SB29.4899 Date of Disbursement 02 / 23 / 2011
	Mailing Address 1155 Charter Road	Amount of Each Disbursement this Period 500.00
	City Warminster State PA Zip Code 18974	Category/ Type
	Purpose of Disbursement Fundraiser tickets Candidate Name	
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)

1750.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Republican City Committee	Transaction ID: SB29.4890 Date of Disbursement
	Mailing Address 1700 Benjamin Franklin Parkway	<input type="text" value="01"/> / <input type="text" value="20"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19103	Amount of Each Disbursement this Period
	Purpose of Disbursement Tickets for governor inauguration	<input type="text" value="1000.00"/>
	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) Republican City Committee	Transaction ID: SB29.4943 Date of Disbursement
	Mailing Address 1700 Benjamin Franklin Parkway	<input type="text" value="05"/> / <input type="text" value="04"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19103	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="625.00"/>
	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) Squilla for Council	Transaction ID: SB29.4958 Date of Disbursement
	Mailing Address P.O. Box 37332	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19148	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="500.00"/>
	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="2125.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER: (check only one)

PAGE 19 / 20

<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)
Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A.	Full Name (Last, First, Middle Initial) Strassheim Graphic Design & Press Corp	Transaction ID: SB29.4954 Date of Disbursement
	Mailing Address 333 N 15th Street	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19102	Amount of Each Disbursement this Period
	Purpose of Disbursement Bullet cards for Jim Divergilis	<input type="text" value="1026.00"/>
	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) Taubenberger for Philadelphia Committee	Transaction ID: SB29.4961 Date of Disbursement
	Mailing Address 1213 Loney Street	<input type="text" value="06"/> / <input type="text" value="02"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19111	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<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) The Blarney PAC	Transaction ID: SB29.4886 Date of Disbursement
	Mailing Address 9630 Milnor Street	<input type="text" value="01"/> / <input type="text" value="13"/> / <input type="text" value="2011"/>
	City Philadelphia State PA Zip Code 19114	Amount of Each Disbursement this Period
	Purpose of Disbursement Fundraiser tickets	<input type="text" value="500.00"/>
	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="1776.00"/>
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 20 / 20

<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)

Brewery Soft Drink Beer Distr Optical Dental Misc Workers Warehouseman Help Local
830 PA

A. Full Name (Last, First, Middle Initial)
The Committee to Secure Bristol's Future

Mailing Address 220 Radcliffe Street

City Bristol State PA Zip Code 19007

Purpose of Disbursement
Fundraiser tickets

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For:
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.4922

Date of Disbursement

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

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

500.00

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

28351.00
