

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5 PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 158-29 GEORGE MEANY BOULEVARD HOWARD BEACH NY 11414

2. FEC IDENTIFICATION NUMBER C C00327478 3. IS THIS REPORT NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One) (a) Quarterly Reports: April 15, July 15, October 15, January 31, July 31 Mid-Year, Termination Report. (b) Monthly Report Due On: Feb 20, Mar 20, Apr 20, May 20, Jun 20, Jul 20, Aug 20, Sep 20, Oct 20, Nov 20, Dec 20, Jan 31. (c) 12-Day PRE-Election Report for the: Primary, General, Runoff, Convention, Special. (d) 30-Day POST-Election Report for the: General, Runoff, Special.

5. Covering Period 07 01 2011 through 09 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. JOHN J. MURPHY

Signature of Treasurer Mr. JOHN J. MURPHY [Electronically Filed] Date 10 14 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.

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, <input type="text" value="2011"/>		190524.57
(b) Cash on Hand at Beginning of Reporting Period.....	315926.64	
(c) Total Receipts (from Line 19) .....	39279.30	293087.12
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	355205.94	483611.69
7. Total Disbursements (from Line 31).....	62334.25	190740.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	292871.69	292871.69
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

Write or Type Committee Name

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Report Covering the Period: From:  /  /  To:  /  /

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 .....	39279.30	293087.12
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	39279.30	293087.12
(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) .....	39279.30	293087.12
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received .....	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3).....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total Transfers (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))..... ▶	39279.30	293087.12
20. Total Federal Receipts (subtract Line 18(c) from Line 19)..... ▶	39279.30	293087.12

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	3791.25	9450.00
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	3791.25	9450.00
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	2500.00	19000.00
24. Independent Expenditures (use Schedule E) .....	0.00	0.00
25. Coordinated Party Expenditures (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 .....	56043.00	162290.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated 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)) ..	62334.25	190740.00
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	62334.25	190740.00

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	39279.30	293087.12
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	39279.30	293087.12
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) .....	3791.25	9450.00
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	3791.25	9450.00

: 97 `A-G79 @C B9CI G`H9LH`F9 @ H98 `HC`5 `F9DCFHZG7 <98I @ `CF`+H9A-N5HCB

Form/Schedule: F3XN  
Transaction ID :

CONTRIBUTIONS ARE RECEIVED BY INDIVIDUALS TOTALING UNDER \$200 EACH IN THE AGGREGATE.

Form/Schedule:  
Transaction ID:

**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

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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRANK CAROLLO & CO., P.C.**

Mailing Address 18 WEST CARVER STREET  
SUITE ONE

City HUNTINGTON State NY Zip Code 11743

Purpose of Disbursement  
FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6979**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**B. FRANK CAROLLO & CO., P.C.**

Mailing Address 18 WEST CARVER STREET  
SUITE ONE

City HUNTINGTON State NY Zip Code 11743

Purpose of Disbursement  
FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.6996**

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C. FRANK CAROLLO & CO., P.C.**

Mailing Address 18 WEST CARVER STREET  
SUITE ONE

City HUNTINGTON State NY Zip Code 11743

Purpose of Disbursement  
FEES

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Date of Disbursement

/  /

**Transaction ID : SB21B.7004**

Amount of Each Disbursement this Period

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

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JOE PAC**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2011

**Transaction ID : SB23.7011**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

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

2500.00

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

2500.00



**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)  
**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial) <b>A. ANDREW CUOMO 2014</b>		Date of Disbursement MM / DD / YYYY 09 / 29 / 2011
Mailing Address		<b>Transaction ID : SB29.7010</b>
City State Zip Code		
Purpose of Disbursement CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 5000.00
Category/Type 011		
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:		

Full Name (Last, First, Middle Initial) <b>B. ANDREW LANZA FOR STATEN ISLAND</b>		Date of Disbursement MM / DD / YYYY 08 / 19 / 2011
Mailing Address		<b>Transaction ID : SB29.6984</b>
City State Zip Code		
Purpose of Disbursement CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 250.00
Category/Type 011		
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:		

Full Name (Last, First, Middle Initial) <b>C. BUILDING AND CONSTRUCTIONS TRADE COUNCIL</b>		Date of Disbursement MM / DD / YYYY 07 / 07 / 2011
Mailing Address		<b>Transaction ID : SB29.6962</b>
City State Zip Code		
Purpose of Disbursement CONTRIBUTION	Candidate Name	Amount of Each Disbursement this Period 2100.00
Category/Type 011		
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:		

<b>SUBTOTAL</b> of Disbursements This Page (optional)..... ▶	7350.00
<b>TOTAL</b> 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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. COMMITTEE TO ELECT MATTHEW J. TITONE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		15		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.6997**

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. COMMITTEE TO RE-ELECT NELSON CASTRO**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.7008**

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

500.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C. CUSICK FOR ASSEMBLY**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09		08		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.6992**

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

400.00
--------

Candidate Name

Office Sought:  House  
 Senate  
 President

State: District:

Disbursement For:

Primary  General  
 Other (specify) ▼

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

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

1400.00
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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 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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. DAVID WEPRIN FOR CONGRESS**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
08 / 19 / 2011

**Transaction ID : SB29.6980**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC ASSEMBLY CAMPAIGN COMMITTEE**

Mailing Address 71 WEST 23RD STREET  
SUITE 501-03

City State Zip Code  
NEW YORK NY 10010

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
07 / 11 / 2011

**Transaction ID : SB29.6967**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. DEMOCRATIC COUNTY COMMITTEE**

Mailing Address 274 WATCHOGUE ROAD

City State Zip Code  
STATEN ISLAND NY 10314

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M / D D / Y Y Y Y Y Y  
09 / 28 / 2011

**Transaction ID : SB29.7007**

Amount of Each Disbursement this Period

2000.00

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

7500.00

**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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF ANDREA STEWART-COUSINS**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		15		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.6999**

Purpose of Disbursement  
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

500.00
--------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF BILL COLTON**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
09		08		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.6991**

Purpose of Disbursement  
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00
---------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF DAN QUART**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
07		11		2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.6968**

Purpose of Disbursement  
CONTRIBUTION

011

Amount of Each Disbursement this Period

Candidate Name

Category/  
Type

1000.00
---------

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

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

2500.00
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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 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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF DARREN RIGGER**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 28 / 2011

**Transaction ID : SB29.7005**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF ESPINAL**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 07 / 2011

**Transaction ID : SB29.6966**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF ESPINAL**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 09 / 2011

**Transaction ID : SB29.6994**

Amount of Each Disbursement this Period

1500.00

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

3000.00

**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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF FRANCISCO MOYA**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 11 / 2011

**Transaction ID : SB29.6970**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. FRIENDS OF JANE DEACY**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 28 / 2011

**Transaction ID : SB29.6975**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**C. FRIENDS OF MIKE MILLER FOR ASSEMBLY**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 10 / 2011

**Transaction ID : SB29.6978**

Amount of Each Disbursement this Period

500.00

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

2500.00

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

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

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

FOR LINE NUMBER:  
(check only one)

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

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NAME OF COMMITTEE (In Full)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. FRIENDS OF SIMANOWITZ**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 26 / 2011

**Transaction ID : SB29.6985**

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

**B. HEVESI FOR ASSEMBLY**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 07 / 2011

**Transaction ID : SB29.6965**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**C. JEFFERSON DEMOCRATIC CLUB**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 19 / 2011

**Transaction ID : SB29.6982**

Amount of Each Disbursement this Period

540.00

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

2040.00

**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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. JENNINGS NYCC**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 31 / 2011

**Transaction ID : SB29.6987**

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

**B. LIBERTY DEMOCRATIC ASSOCIATION**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
09 / 08 / 2011

**Transaction ID : SB29.6993**

Amount of Each Disbursement this Period

600.00

Full Name (Last, First, Middle Initial)

**C. MALCOLM A. SMITH FOR NEW YORK**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 21 / 2011

**Transaction ID : SB29.6973**

Amount of Each Disbursement this Period

800.00

**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)

<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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. NEW YORKERS FOR KLEIN**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 05 / 2011

**Transaction ID : SB29.6961**

Amount of Each Disbursement this Period

2500.00

Full Name (Last, First, Middle Initial)

**B. NEW YORK STATE PIPE TRADES**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
08 / 02 / 2011

**Transaction ID : SB29.6977**

Amount of Each Disbursement this Period

10131.00

Full Name (Last, First, Middle Initial)

**C. QUINN FOR NEW YORK**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
07 / 07 / 2011

**Transaction ID : SB29.6963**

Amount of Each Disbursement this Period

2000.00

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

14631.00

**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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. RAFAEL ESPINAL**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 06 / 2011

**Transaction ID : SB29.6989**

Amount of Each Disbursement this Period

1500.00

Full Name (Last, First, Middle Initial)

**B. SCHNEIDERMAN FOR ATTORNEY GENERAL**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
09 / 13 / 2011

**Transaction ID : SB29.6995**

Amount of Each Disbursement this Period

3000.00

Full Name (Last, First, Middle Initial)

**C. STEVENSON 2012**

Mailing Address

City State Zip Code

Purpose of Disbursement  
CONTRIBUTION

011

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Date of Disbursement

MM / DD / YYYY  
07 / 11 / 2011

**Transaction ID : SB29.6971**

Amount of Each Disbursement this Period

1225.00

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

5725.00

**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)

**PLUMBERS LOCAL UNION NO. 1 NYC-POLITICAL ACTION COMMITTEE**

Full Name (Last, First, Middle Initial)

**A. UA POLITICAL EDUCATION COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.7001**

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

3903.00
---------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**B. UA POLITICAL EDUCATION COMMITTEE**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
09	/	21	/	2011

Mailing Address

City State Zip Code

**Transaction ID : SB29.7002**

Purpose of Disbursement  
CONTRIBUTION

011
Category/ Type

Amount of Each Disbursement this Period

3444.00
---------

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

Full Name (Last, First, Middle Initial)

**C.**

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
	/		/	

Mailing Address

City State Zip Code

Amount of Each Disbursement this Period

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Purpose of Disbursement

Category/ Type

Candidate Name

Office Sought:  House  
 Senate  
 President  
State: District:

Disbursement For:  
 Primary  General  
 Other (specify) ▼

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

7347.00
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**TOTAL** This Period (last page this line number only)..... ▶

55893.00
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