

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
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

ADDRESS (number and street) 65 SPRINGFIELD AVENUE
 Check if different than previously reported. (ACC)
SPRINGFIELD NJ 07081

2. **FEC IDENTIFICATION NUMBER** C00017194
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 (12S)
Election on _____ in the State of _____
(d) 30-Day **Post -Election** Report for the:
 General (30G) Runoff (30R) Special (30S)
Election on 11 02 2010 in the State of _____

5. Covering Period 10 01 2010 through 11 22 2010

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. Greg Lalevee

Signature of Treasurer Electronically Filed by Mr. Greg Lalevee Date 12 02 2010

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office Use Only **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		490423.08
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	697758.20									
(c) Total Receipts (from Line 19)	50563.98	274317.16								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	748322.18	764740.24								
7. Total Disbursements (from Line 31)	38622.75	55040.81								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	709699.43	709699.43								
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

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

Report Covering the Period: From:

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
1	1

D	D
2	2

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	50509.21	273810.79
(iii) TOTAL (add Lines 11(a)(i) and (ii)	50509.21	273810.79
(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)	50509.21	273810.79
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.)	54.77	506.37
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))	50563.98	274317.16
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	50563.98	274317.16

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.....	4622.75	21040.81
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4622.75	21040.81
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	34000.00	34000.00
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))..	38622.75	55040.81
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	38622.75	55040.81

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

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)	50509.21	273810.79
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	50509.21	273810.79
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4622.75	21040.81
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	4622.75	21040.81

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 6 / 13

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 12
<input type="checkbox"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16

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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

A.

Full Name (Last, First, Middle Initial)
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
453.09

Date of Receipt

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

Transaction ID: SA17.6449

Amount of Each Receipt this Period

1.49

Interest Earned

B.

Full Name (Last, First, Middle Initial)
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
503.08

Date of Receipt

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

Transaction ID: SA17.6450

Amount of Each Receipt this Period

49.99

Interest Earned

C.

Full Name (Last, First, Middle Initial)
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

FEC ID number of contributing federal political committee. **C**

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
506.37

Date of Receipt

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

Transaction ID: SA17.6451

Amount of Each Receipt this Period

3.29

Interest Earned

SUBTOTAL of Receipts This Page (optional)

54.77

TOTAL This Period (last page this line number only)

54.77

**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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

A.	Full Name (Last, First, Middle Initial) Internal Revenue Service Mailing Address City Ogden State UT Zip Code 84201 Purpose of Disbursement Income Tax Expense 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.6495 Date of Disbursement 10 / 07 / 2010 Amount of Each Disbursement this Period 149.00 001 Category/ Type	
B.	Full Name (Last, First, Middle Initial) Moore Stephens, P.C. Mailing Address 340 North Avenue City Cranford State NJ Zip Code 07016 Purpose of Disbursement Accounting Fees 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.6496 Date of Disbursement 10 / 14 / 2010 Amount of Each Disbursement this Period 1925.00 001 Category/ Type	
C.	Full Name (Last, First, Middle Initial) Progress Printing Company, Inc. Mailing Address 338 Montgomery Street P.O. Box 442 City Jersey City State NJ Zip Code 07302 Purpose of Disbursement Postage 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.6497 Date of Disbursement 10 / 25 / 2010 Amount of Each Disbursement this Period 2511.08 001 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ►

4585.08

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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A. Full Name (Last, First, Middle Initial)
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charges

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6452

Date of Disbursement

10 / 31 / 2010

Amount of Each Disbursement this Period

24.72

B. Full Name (Last, First, Middle Initial)
WACHOVIA BANK, NATIONAL ASSOC.

Mailing Address NC8502
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charges

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6453

Date of Disbursement

10 / 31 / 2010

Amount of Each Disbursement this Period

12.95

SUBTOTAL of Disbursements This Page (optional) ▶

37.67

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

4622.75

**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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

A. Full Name (Last, First, Middle Initial) Art Schenker for Freeholder <hr/> Mailing Address 18 S. Aberdeen Place <hr/> City Atlantic City State NJ Zip Code 08401 <hr/> Purpose of Disbursement Direct 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: SB29.6461 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Bergen County Democratic Organization <hr/> Mailing Address 50 Main Street <hr/> City Hackensack State NJ Zip Code 07601 <hr/> Purpose of Disbursement Direct 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: SB29.6483 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 9 / 2 0 1 0
	Amount of Each Disbursement this Period 3000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Bloomfield Democratic Team <hr/> Mailing Address 29 Stone St. <hr/> City Bloomfield State NJ Zip Code 07003 <hr/> Purpose of Disbursement Direct 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: SB29.6457 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 1 0
	Amount of Each Disbursement this Period 2000.00
	011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

6000.00

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

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

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

FOR LINE NUMBER: (check only one)

<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)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.	Full Name (Last, First, Middle Initial) EFO Kevin P. Egan	Transaction ID: SB29.6486 Date of Disbursement
	Mailing Address 542 VICTOR STREET	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Scotch Plains State NJ Zip Code 07076	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Contribution	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> 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) EFO Thompson & Pepitone for Freeholder	Transaction ID: SB29.6469 Date of Disbursement
	Mailing Address PO BOX 812	<input type="text" value="10"/> / <input type="text" value="27"/> / <input type="text" value="2010"/>
	City VINELAND State NJ Zip Code 08362	Amount of Each Disbursement this Period
	Purpose of Disbursement Direct Contribution	<input type="text" value="1000.00"/>
	Candidate Name	<input type="text" value="011"/> 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 BERT STEINMANN	Transaction ID: SB29.6485 Date of Disbursement
	Mailing Address 1230 Parkway Avenue	<input type="text" value="11"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City Ewing State NJ Zip Code 08628	Amount of Each Disbursement this Period
	Purpose of Disbursement Cocktail Reception	<input type="text" value="500.00"/>
	Candidate Name	<input type="text" value="011"/> 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="2000.00"/>
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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A. Full Name (Last, First, Middle Initial) Gorman for Freeholder <hr/> Mailing Address 18 W. MCKINLEY AVENUE <hr/> City GALLOWAY State NJ Zip Code 08205 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6465 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Greenstein for Senate <hr/> Mailing Address P.O. Box 492 <hr/> City Plainsboro State NJ Zip Code 08536 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6470 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) New Jersey Democratic State Committee <hr/> Mailing Address 196 WEST STATE STREET <hr/> City TRENTON State NJ Zip Code 08608 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6472 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 7 / 2 0 1 0
	Amount of Each Disbursement this Period 10000.00
	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: <hr/> Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

16000.00

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)

INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION
COMMITT

A. Full Name (Last, First, Middle Initial) O'Donnell for Assembly 2010 <hr/> Mailing Address PO BOX 1063 <hr/> City Bayonne State NJ Zip Code 07002 <hr/> Purpose of Disbursement Direct 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: SB29.6481 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 5000.00
	<input type="checkbox"/> 011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) Park Ridge Victory <hr/> Mailing Address PO BOX 322 <hr/> City Park Ridge State NJ Zip Code 07656 <hr/> Purpose of Disbursement Direct 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: SB29.6488 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 1 0
	Amount of Each Disbursement this Period 500.00
	<input type="checkbox"/> 011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) Pittman Democratic Party <hr/> Mailing Address 11 CENTRAL AVE. <hr/> City Pitman State NJ Zip Code 08071 <hr/> Purpose of Disbursement Direct 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: SB29.6479 Date of Disbursement M M / D D / Y Y Y Y 1 0 / 2 8 / 2 0 1 0
	Amount of Each Disbursement this Period 1000.00
	<input type="checkbox"/> 011 Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional)

6500.00

TOTAL This Period (last page this line number only)

