

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
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) P.O. BOX 4187
136 MOUNT BETHEL ROAD
 Check if different than previously reported. (ACC)
WARREN NJ 07059

2. **FEC IDENTIFICATION NUMBER** C00252395
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 Michael Mulvaney

Signature of Treasurer Electronically Filed by Michael Mulvaney Date 07 12 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 **FEC FORM 3X** (Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

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		72843.47
X	Y	Y	Y							
2	0	1	1							
(b) Cash on Hand at Beginning of Reporting Period	72843.47									
(c) Total Receipts (from Line 19)	64613.87	64613.87								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	137457.34	137457.34								
7. Total Disbursements (from Line 31)	70864.29	70864.29								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	66593.05	66593.05								
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

STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

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)	62660.06	62660.06
(ii) Unitemized	0.00	0.00
(iii) TOTAL (add Lines 11(a)(i) and (ii)	62660.06	62660.06
(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)	62660.06	62660.06
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	1900.00	1900.00
17. Other Federal Receipts (Dividends, Interest, etc.)	53.81	53.81
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))	64613.87	64613.87
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	64613.87	64613.87

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.....	50964.29	50964.29
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	50964.29	50964.29
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	1000.00	1000.00
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.....	18900.00	18900.00
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))..	70864.29	70864.29
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	70864.29	70864.29

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)	62660.06	62660.06
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	62660.06	62660.06
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	50964.29	50964.29
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	50964.29	50964.29

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 6 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 1874.67

Date of Receipt: 01 / 06 / 2011
Transaction ID: SA11AI.6549
 Amount of Each Receipt this Period: 1874.67
 PAC FUND DUES

B. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 18924.65

Date of Receipt: 01 / 10 / 2011
Transaction ID: SA11AI.6550
 Amount of Each Receipt this Period: 17049.98
 PAC FUND DUES

C. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 19388.10

Date of Receipt: 01 / 13 / 2011
Transaction ID: SA11AI.6551
 Amount of Each Receipt this Period: 463.45
 PAC FUND DUES

SUBTOTAL of Receipts This Page (optional) ► 19388.10

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 7 / 30
(check only one)

<input checked="" 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 type="checkbox"/> 16
<input type="checkbox"/> 17			

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial) STEAMFITTERS LOCAL 475		Date of Receipt MM / DD / YYYY 02 / 16 / 2011
Mailing Address 136 Mount Bethel Rd PO Box 4187		Transaction ID: SA11AI.6559
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 2891.52
Name of Employer	Occupation	Pac Fund Dues
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 22279.62	

B.

Full Name (Last, First, Middle Initial) STEAMFITTERS LOCAL 475		Date of Receipt MM / DD / YYYY 02 / 28 / 2011
Mailing Address 136 Mount Bethel Rd PO Box 4187		Transaction ID: SA11AI.6560
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 6950.99
Name of Employer	Occupation	Pac Fund Dues
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 29230.61	

C.

Full Name (Last, First, Middle Initial) STEAMFITTERS LOCAL 475		Date of Receipt MM / DD / YYYY 03 / 10 / 2011
Mailing Address 136 Mount Bethel Rd PO Box 4187		Transaction ID: SA11AI.6577
City Warren	State NJ	Zip Code 07059
FEC ID number of contributing federal political committee. C		Amount of Each Receipt this Period 7442.13
Name of Employer	Occupation	Pac Fund Dues
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ 36672.74	

SUBTOTAL of Receipts This Page (optional)	17284.64
TOTAL This Period (last page this line number only)	

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 8 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 36828.74

Date of Receipt: 03 / 31 / 2011
Transaction ID: SA11AI.6578
 Amount of Each Receipt this Period: 156.00
 Pac Fund Dues

B. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 39041.76

Date of Receipt: 04 / 05 / 2011
Transaction ID: SA11AI.6607
 Amount of Each Receipt this Period: 2213.02
 Pac Fund Dues

C. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼ 44920.85

Date of Receipt: 04 / 11 / 2011
Transaction ID: SA11AI.6608
 Amount of Each Receipt this Period: 5879.09

SUBTOTAL of Receipts This Page (optional) ► 8248.11

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

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 9 / 30

(check only one)

<input checked="" 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 type="checkbox"/> 16 <input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City State Zip Code
Warren NJ 07059

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 45384.30

Date of Receipt

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

Transaction ID: SA11AI.6609

Amount of Each Receipt this Period

463.45

B.

Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City State Zip Code
Warren NJ 07059

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 47827.52

Date of Receipt

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

Transaction ID: SA11AI.6623

Amount of Each Receipt this Period

2443.22

Pac Fund Dues

C.

Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City State Zip Code
Warren NJ 07059

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

Name of Employer Occupation

Receipt For: Primary General Other (specify) ▼
Aggregate Year-to-Date ▼ 53805.50

Date of Receipt

M M / D D / Y Y Y Y
0 5 / 1 8 / 2 0 1 1

Transaction ID: SA11AI.6624

Amount of Each Receipt this Period

5977.98

Pac Fund Dues

SUBTOTAL of Receipts This Page (optional)

8884.65

TOTAL This Period (last page this line number only)

**SCHEDULE A (FEC Form 3X)
ITEMIZED RECEIPTS**

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

FOR LINE NUMBER: PAGE 10 / 30
(check only one)
 11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
59776.23

Date of Receipt

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

Transaction ID: SA11AI.6639

Amount of Each Receipt this Period
5970.73

Pac Fund Dues

B. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62210.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	1	1

Transaction ID: SA11AI.6640

Amount of Each Receipt this Period
2433.83

Pac Fund Dues

C. Full Name (Last, First, Middle Initial)
STEAMFITTERS LOCAL 475

Mailing Address 136 Mount Bethel Rd
PO Box 4187

City Warren State NJ Zip Code 07059

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
62660.06

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	6	/	1	3	/	2	0	1	1

Transaction ID: SA11AI.6641

Amount of Each Receipt this Period
450.00

Pac Fund Dues

SUBTOTAL of Receipts This Page (optional) ► **8854.56**

TOTAL This Period (last page this line number only) ► **62660.06**

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:		PAGE 11 / 30	
	(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"/> 13	<input type="checkbox"/> 14	<input type="checkbox"/> 15	<input checked="" type="checkbox"/> 16	<input type="checkbox"/> 17

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Election Fund of Raymond J. Lesniak

Mailing Address 770 North Drive

City State Zip Code
Brick NJ 08724

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
1900.00

Date of Receipt
M M / D D / Y Y Y Y
03 / 17 / 2011

Transaction ID: SA16.6580

Amount of Each Receipt this Period
1900.00

Refund

SUBTOTAL of Receipts This Page (optional)	▶	1900.00
TOTAL This Period (last page this line number only)	▶	1900.00

**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 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
Edward Fraass, Jr.

Transaction ID: SB21B.6596
Date of Disbursement

Mailing Address 6 Mill Lane

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

City State Zip Code
Dayton NJ 08810

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
National Bldg Trades Conference
Candidate Name

Category/
Type

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

B.

Full Name (Last, First, Middle Initial)
WILLIAM P. HARVEY, Jr.

Transaction ID: SB21B.6650
Date of Disbursement

Mailing Address 1971 ERNST TERRACE

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	7		2	0	1	1

City State Zip Code
UNION NJ 07083

Amount of Each Disbursement this Period

450.00

Purpose of Disbursement
AFL-CIO Conference
Candidate Name

Category/
Type

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

C.

Full Name (Last, First, Middle Initial)
MICHAEL R. HOLSWORTH

Transaction ID: SB21B.6600
Date of Disbursement

Mailing Address 14 BIRCH TERRACE

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

City State Zip Code
PARLIN NJ 08859

Amount of Each Disbursement this Period

600.00

Purpose of Disbursement
National Bldg Trades Conference
Candidate Name

Category/
Type

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

SUBTOTAL of Disbursements This Page (optional)

1650.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 14 / 30

<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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) MACPAC	Transaction ID: SB21B.6568 Date of Disbursement 02 / 09 / 2011
	Mailing Address 1301 South Columbus Blvd	Amount of Each Disbursement this Period 5200.00
	City Philadelphia State PA Zip Code 19147	
	Purpose of Disbursement 2011 Per Capita Fees	
	Candidate Name	Category/Type
	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.	Full Name (Last, First, Middle Initial) John McQuilken	Transaction ID: SB21B.6647 Date of Disbursement 06 / 07 / 2011
	Mailing Address 573 No. Lake Shore Drive	Amount of Each Disbursement this Period 450.00
	City Brick State NJ Zip Code 08723	
	Purpose of Disbursement AFL-CIO Conference	
	Candidate Name	Category/Type
	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:	

C.	Full Name (Last, First, Middle Initial) MSPC	Transaction ID: SB21B.6610 Date of Disbursement 04 / 12 / 2011
	Mailing Address 340 North Ave	Amount of Each Disbursement this Period 1500.00
	City Cranford State NJ Zip Code 07016	
	Purpose of Disbursement Tax Services	
	Candidate Name	Category/Type
	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:	

SUBTOTAL of Disbursements This Page (optional)	7150.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) Michael Mulvaney	Transaction ID: SB21B.6599 Date of Disbursement 03 / 21 / 2011
	Mailing Address 890 Roundtree Drive	Amount of Each Disbursement this Period 600.00
	City Toms River State NJ Zip Code 08724	
	Purpose of Disbursement National Bldg Trades Conference 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) Michael Mulvaney	Transaction ID: SB21B.6648 Date of Disbursement 06 / 07 / 2011
	Mailing Address 890 Roundtree Drive	Amount of Each Disbursement this Period 450.00
	City Toms River State NJ Zip Code 08724	
	Purpose of Disbursement AFL-CIO Conference 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) NJ DEMOCRATIC STATE COMMITTEE	Transaction ID: SB21B.6618 Date of Disbursement 04 / 22 / 2011
	Mailing Address 196 WEST STATE STREET	Amount of Each Disbursement this Period 222.00
	City TRENTON State NJ Zip Code 08608	
	Purpose of Disbursement 2 Registrations 2011 Conf 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)	1272.00
TOTAL This Period (last page this line number only)	

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

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

FOR LINE NUMBER:
(check only one)

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<input 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) NJ STATE AFL-CIO <hr/> Mailing Address 106 WEST STATE STREET <hr/> City TRENTON State NJ Zip Code 08608 <hr/> Purpose of Disbursement 2nd Qtr Per Capita Fee 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: SB21B.6611 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 350.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B. Full Name (Last, First, Middle Initial) NJ STATE AFL-CIO <hr/> Mailing Address 106 WEST STATE STREET <hr/> City TRENTON State NJ Zip Code 08608 <hr/> Purpose of Disbursement 5 Registrations & Luncheons 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: SB21B.6632 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1250.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
C. Full Name (Last, First, Middle Initial) NJ STATE AFL-CIO <hr/> Mailing Address 106 WEST STATE STREET <hr/> City TRENTON State NJ Zip Code 08608 <hr/> Purpose of Disbursement 1/2 Page Ad 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: SB21B.6633 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	Amount of Each Disbursement this Period 500.00
	Category/ Type
	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

SUBTOTAL of Disbursements This Page (optional) ▶

2100.00

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

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

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

FOR LINE NUMBER:
(check only one)

<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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) NJ STATE AFL-CIO C.O.P.E.	Transaction ID: SB21B.6555 Date of Disbursement 01 / 11 / 2011
	Mailing Address 106 WEST STATE STREET	Amount of Each Disbursement this Period 350.00
	City TRENTON State NJ Zip Code 08608	
	Purpose of Disbursement 1st Qtr Per Capita	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) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND	Transaction ID: SB21B.6552 Date of Disbursement 01 / 04 / 2011
	Mailing Address P.O. BOX 73	Amount of Each Disbursement this Period 2250.80
	City WINDSLOW State NJ Zip Code 08095	
	Purpose of Disbursement 112540 hours fro December 2010	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) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND	Transaction ID: SB21B.6561 Date of Disbursement 02 / 01 / 2011
	Mailing Address P.O. BOX 73	Amount of Each Disbursement this Period 860.06
	City WINDSLOW State NJ Zip Code 08095	
	Purpose of Disbursement 43003 hours for Jan 2011	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)	3460.86
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND</p> <p>Mailing Address P.O. BOX 73</p> <p>City WINDSLOW State NJ Zip Code 08095</p> <p>Purpose of Disbursement 34840 hours Feb 2011</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6593</p> <p>Date of Disbursement 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 696.80</p>
<p>B. Full Name (Last, First, Middle Initial) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND</p> <p>Mailing Address P.O. BOX 73</p> <p>City WINDSLOW State NJ Zip Code 08095</p> <p>Purpose of Disbursement 39191 hours March 2011</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6612</p> <p>Date of Disbursement 04 / 12 / 2011</p> <p>Amount of Each Disbursement this Period 783.82</p>
<p>C. Full Name (Last, First, Middle Initial) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND</p> <p>Mailing Address P.O. BOX 73</p> <p>City WINDSLOW State NJ Zip Code 08095</p> <p>Purpose of Disbursement 39851 hours April 2011</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6625</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 797.02</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2277.64

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NJ STATE ASSOCIATION OF PIPE TRADES PAC FUND</p> <p>Mailing Address P.O. BOX 73</p> <p>City WINDSLOW State NJ Zip Code 08095</p> <p>Purpose of Disbursement 38516 Hours in May 2011</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6642</p> <p>Date of Disbursement 06 / 01 / 2011</p> <p>Amount of Each Disbursement this Period 770.32</p>
<p>B. Full Name (Last, First, Middle Initial) ROBERT SHERLOCK</p> <p>Mailing Address 14 LAKEVIEW DRIVE</p> <p>City HELMETTA State NJ Zip Code 08828</p> <p>Purpose of Disbursement AFL-CIO Conference</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6649</p> <p>Date of Disbursement 06 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p>C. Full Name (Last, First, Middle Initial) STEAMFITTERS LOCAL 475</p> <p>Mailing Address 136 Mount Bethel Rd PO Box 4187</p> <p>City Warren State NJ Zip Code 07059</p> <p>Purpose of Disbursement Reimburse for Rally to Washington</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6594</p> <p>Date of Disbursement 03 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 1040.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

2260.32

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) STEAMFITTERS LOCAL 475	Transaction ID: SB21B.6602 Date of Disbursement 03 / 21 / 2011
	Mailing Address 136 Mount Bethel Rd PO Box 4187	Amount of Each Disbursement this Period 2209.14
	City Warren State NJ Zip Code 07059	
	Purpose of Disbursement Reimburse Payroll National Bldg Trades Conf	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) STEAMFITTERS LOCAL 475	Transaction ID: SB21B.6644 Date of Disbursement 06 / 07 / 2011
	Mailing Address 136 Mount Bethel Rd PO Box 4187	Amount of Each Disbursement this Period 2758.78
	City Warren State NJ Zip Code 07059	
	Purpose of Disbursement Reimburse payroll AFL-CIO Conf	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) Shaun Sullivan	Transaction ID: SB21B.6601 Date of Disbursement 03 / 21 / 2011
	Mailing Address P.O. Box 4187	Amount of Each Disbursement this Period 600.00
	City Warren State NJ Zip Code 07059	
	Purpose of Disbursement National Bldg Trades Conference	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)	5567.92
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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
U.A. POLITICAL EDUCATION FUND

Transaction ID: SB21B.6554
Date of Disbursement

Mailing Address THREE PARK PLACE

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

City ANNAPOLIS State MD Zip Code 21401

Amount of Each Disbursement this Period

5627.00

Purpose of Disbursement
112540 hours for Dec 2010

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
U.A. POLITICAL EDUCATION FUND

Transaction ID: SB21B.6562
Date of Disbursement

Mailing Address THREE PARK PLACE

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

City ANNAPOLIS State MD Zip Code 21401

Amount of Each Disbursement this Period

2150.15

Purpose of Disbursement
43003 hours for Jan 2011

--

Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
U.A. POLITICAL EDUCATION FUND

Transaction ID: SB21B.6595
Date of Disbursement

Mailing Address THREE PARK PLACE

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	8		2	0	1	1

City ANNAPOLIS State MD Zip Code 21401

Amount of Each Disbursement this Period

1742.00

Purpose of Disbursement
34840 Hours for Feb 2011

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Candidate Name

Category/ Type

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

9519.15

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) U.A. POLITICAL EDUCATION FUND <hr/> Mailing Address THREE PARK PLACE <hr/> City ANNAPOLIS State MD Zip Code 21401 <hr/> Purpose of Disbursement 39191 hours March 2011 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: SB21B.6613 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 1 2 / 2 0 1 1
	Amount of Each Disbursement this Period 1959.55
	Category/ Type
	Category/ Type
B. Full Name (Last, First, Middle Initial) U.A. POLITICAL EDUCATION FUND <hr/> Mailing Address THREE PARK PLACE <hr/> City ANNAPOLIS State MD Zip Code 21401 <hr/> Purpose of Disbursement 39851 Hours for April 2011 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: SB21B.6626 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 1 9 / 2 0 1 1
	Amount of Each Disbursement this Period 1992.55
	Category/ Type
	Category/ Type
C. Full Name (Last, First, Middle Initial) U.A. POLITICAL EDUCATION FUND <hr/> Mailing Address THREE PARK PLACE <hr/> City ANNAPOLIS State MD Zip Code 21401 <hr/> Purpose of Disbursement 38516 Hours for May 2011 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: SB21B.6643 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 1 / 2 0 1 1
	Amount of Each Disbursement this Period 1925.80
	Category/ Type
	Category/ Type

SUBTOTAL of Disbursements This Page (optional) ►

5877.90

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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Washington Hilton & Towers</p> <p>Mailing Address 1919 Connecticut Avenue, NW</p> <p>City Washington State DC Zip Code 20009</p> <p>Purpose of Disbursement 5 (3) Night Reservations</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6564 Date of Disbursement 02 / 08 / 2011</p> <p>Amount of Each Disbursement this Period 5660.90</p>
<p>B. Full Name (Last, First, Middle Initial) ANDREW WELCH</p> <p>Mailing Address 90 Kenilworth Ave</p> <p>City Cranford State NJ Zip Code 07016</p> <p>Purpose of Disbursement AFL-CIO Conference</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6645 Date of Disbursement 06 / 07 / 2011</p> <p>Amount of Each Disbursement this Period 450.00</p>
<p>C. Full Name (Last, First, Middle Initial) Wisconsin State AFL-CIO</p> <p>Mailing Address 6333 West Blue Mound Road</p> <p>City Milwaukee State WI Zip Code 53213</p> <p>Purpose of Disbursement</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB21B.6572 Date of Disbursement 02 / 25 / 2011</p> <p>Amount of Each Disbursement this Period 500.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

6610.90

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

50635.69

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

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

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input 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)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
PAYNE, DONALD M.

Transaction ID: SB23.6584
Date of Disbursement

Mailing Address P.O. BOX 2406

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

City State Zip Code
NEWARK NJ 07114

Amount of Each Disbursement this Period

1000.00

Purpose of Disbursement
Donation

--

Candidate Name

Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2012
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ▶

1000.00

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

1000.00

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Committee to Elect Cryan & Quijano</p> <p>Mailing Address P.O. Box 2150</p> <p>City Union State NJ Zip Code 07083-2150</p> <p>Purpose of Disbursement 2 Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6566 Date of Disbursement 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>B. Full Name (Last, First, Middle Initial) Committee to Re-Elect Mayor James P. Dodd</p> <p>Mailing Address 331 Richards Avenue</p> <p>City Dover State NJ Zip Code 07801</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 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6629 Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>C. Full Name (Last, First, Middle Initial) Committee to Re-Elect Robert M. Ruane</p> <p>Mailing Address 40 Conger Street Apt 1512A</p> <p>City Bloomfield State NJ Zip Code 07003</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 Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p>	<p>Transaction ID: SB29.6603 Date of Disbursement 03 / 23 / 2011</p> <p>Amount of Each Disbursement this Period 300.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

1550.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) Democratic Assembly Campaign Committee</p> <p>Mailing Address P.O. Box 3712</p> <p>City Trenton State NJ Zip Code 08629</p> <p>Purpose of Disbursement 2 Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB29.6581 Date of Disbursement 03 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 3000.00</p>
<p>B. Full Name (Last, First, Middle Initial) ELECTION FUND OF ANNETTE QUIJANO</p> <p>Mailing Address 311 W. HENRY STREET</p> <p>City LINDEN State NJ Zip Code 07036</p> <p>Purpose of Disbursement Donation</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:</p>	<p>Transaction ID: SB29.6585 Date of Disbursement 03 / 02 / 2011</p> <p>Amount of Each Disbursement this Period 600.00</p>
<p>C. Full Name (Last, First, Middle Initial) ELECTION FUND OF BARBARA BUONO</p> <p>Mailing Address 75 Woodbridge Avenue</p> <p>City Metuchen State NJ Zip Code 08840</p> <p>Purpose of Disbursement 2 Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NJ District:</p>	<p>Transaction ID: SB29.6615 Date of Disbursement 04 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 2000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

5600.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) ELECTION FUND OF DONALD NORCROSS	Transaction ID: SB29.6586 Date of Disbursement																			
	Mailing Address P.O. BOX 1003	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	1	1												
	City CAMDEN State NJ Zip Code 08101	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2 Guests	<table border="1"><tr><td>1000.00</td></tr></table>	1000.00																		
1000.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

B.	Full Name (Last, First, Middle Initial) ELECTION FUND OF JOSEPH CRYAN	Transaction ID: SB29.6587 Date of Disbursement																			
	Mailing Address P.O. Box 2245	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>3</td><td></td><td>0</td><td>2</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	3		0	2		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	3		0	2		2	0	1	1												
	City Union State NJ Zip Code 07083	Amount of Each Disbursement this Period																			
	Purpose of Disbursement Donation	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NJ District:	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

C.	Full Name (Last, First, Middle Initial) Election Fund of Joseph V. Egan	Transaction ID: SB29.6627 Date of Disbursement																			
	Mailing Address 977 Hoover Drive	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>1</td><td>9</td><td></td><td>2</td><td>0</td><td>1</td><td>1</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		1	9		2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5		1	9		2	0	1	1												
	City North Brunswick State NJ Zip Code 08902	Amount of Each Disbursement this Period																			
	Purpose of Disbursement 2 Tickets	<table border="1"><tr><td>2000.00</td></tr></table>	2000.00																		
2000.00																					
	Candidate Name	Category/ Type																			
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																			

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>3250.00</td></tr></table>	3250.00
3250.00		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td></td></tr></table>	

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial) Election Fund of Ralph R. Caputo <hr/> Mailing Address 47 Passaic Avenue <hr/> City Belleville State NJ Zip Code 07109 Purpose of Disbursement 2 Tickets Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6591 Date of Disbursement M M / D D / Y Y Y Y 03 / 02 / 2011
	Amount of Each Disbursement this Period 400.00
B. Full Name (Last, First, Middle Initial) Election Fund of Raymond J. Lesniak <hr/> Mailing Address 770 North Drive <hr/> City Brick State NJ Zip Code 08724 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: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6628 Date of Disbursement M M / D D / Y Y Y Y 05 / 19 / 2011
	Amount of Each Disbursement this Period 1000.00
C. Full Name (Last, First, Middle Initial) Joseph Divincenzo For Essex County Executive <hr/> Mailing Address PO Box 266 <hr/> City Nutley State NJ Zip Code 07110 Purpose of Disbursement 1 Ticket Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.6605 Date of Disbursement M M / D D / Y Y Y Y 03 / 23 / 2011
	Amount of Each Disbursement this Period 300.00

SUBTOTAL of Disbursements This Page (optional) ▶

1700.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

<p>A. Full Name (Last, First, Middle Initial) NJMACC Pac Fund</p> <p>Mailing Address 318 Cleveland Avenue</p> <p>City Highland Park State NJ Zip Code 08904</p> <p>Purpose of Disbursement Sponsor a Hole</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6635</p> <p>Date of Disbursement 05 / 19 / 2011</p> <p>Amount of Each Disbursement this Period 250.00</p>
<p>B. Full Name (Last, First, Middle Initial) Scutari for Senate</p> <p>Mailing Address 20 Kennedy Drive</p> <p>City Clark State NJ Zip Code 07066</p> <p>Purpose of Disbursement 2 Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6620</p> <p>Date of Disbursement 04 / 22 / 2011</p> <p>Amount of Each Disbursement this Period 1000.00</p>
<p>C. Full Name (Last, First, Middle Initial) Senate Democratic Majority</p> <p>Mailing Address 194-196 West State Street</p> <p>City Trenton State NJ Zip Code 08608</p> <p>Purpose of Disbursement 2 Tickets</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2011 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p>	<p>Transaction ID: SB29.6569</p> <p>Date of Disbursement 02 / 09 / 2011</p> <p>Amount of Each Disbursement this Period 3000.00</p>

SUBTOTAL of Disbursements This Page (optional) ▶

4250.00

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

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)
STEAMFITTERS LOCAL 475 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
VANDREW FOR STATE ASSEMBLY

Transaction ID: SB29.6570

Date of Disbursement

Mailing Address P.O. Box 941

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

City State Zip Code
Cape May Court HS NJ 08210

Amount of Each Disbursement this Period

2000.00

Purpose of Disbursement
2 Tickets

--

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2011
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

18350.00
