05/04/2010 13:54

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FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT ₩ over the lines PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC 743 N BEACH STREET ADDRESS (number and street) Check if different than previously DAYTONA BEACH FL 32114 3279 reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** CITY A ZIPCODE A IS THIS **AMENDED** NEW C00147181 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) 12-Day (c) Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year Х (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: Termination Report (TER) in the Election on State of 0 1 0 1 2009 06 30 2009 Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. **BRETT MIRSKY** Type or Print Name of Treasurer Electronically Filed by **BRETT MIRSKY** 05 04 2010 Signature of Treasurer Date 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 **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

FEC Form 3X (Rev. 02/2003)

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS

2 / 18

Write or Type Committee Name PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC м м 0 1 Y W Y 2009 м м 0 6 ^D 30 D D 2009 0 1 To: Report Covering the Period: From:

		COLUMN A This Period	COLUMN B Calendar Year-to-Date
i. (a) Cash on Hand January 1 2009 Y Y Y		7329.88
(b	Cash on Hand at Begining of Reporting Period	7329.88	
(c) Total Receipts (from Line 19)	19689.61	19689.61
(c) Subtotal (add lines 6(b) and		
	6(c) for Column A and Lines 6(a) and 6(c) for Column B)	27019.49	27019.49
. То	otal Disbursements (from Line 31)	19235.02	19235.02
Re	ash on Hand at Close of eporting Period ubtract Line 7 from Line 6(d))	7784.47	7784.47
th	ebts and Obligations owed committee (Itemize all on chedule C and/or Schedule D)	0.00	
th	ebts and Obligations owed BY e committee (Itemize all on Schedule C and/or Schedule D)	0.00	

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

FEC Form 3X (Rev. 06/2004) 3 / 18

Write or Type Committee Name

PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC

Report Covering the Period:

From:

M M D D D 0 1

2009

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^D 3 0

^Y 2009

	I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Contributions (other than loans) From: a) Individuals/Persons Other		
	Than Political Committees (i) Itemized (use Schedule A)	0.00	0.00
	(ii) Unitemized	9689.61	9689.61
	(iii) TOTAL (add Lines 11(a)(i) and (ii)	9689.61	9689.61
(k	o) Political Party Committees	0.00	0.00
(0	c) Other Political Committees (such as PACs)	0.00	0.00
	11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5)	9689.61	9689.61
	ransfers From Affiliated/Other arty Committees	10000.00	10000.00
3. A	III Loans Received	0.00	0.00
	oan Repayments Received	0.00	0.00
(0	Refunds, Rebates, etc.) Carry Totals to Line 37, page 5)	0.00	0.00
to	o Federal candidates and Other Colitical Committees	0.00	0.00
	Other Federal Receipts Dividends, Interest, etc.)	0.00	0.00
	ransfers from Non-Federal and Levin Funds		
(8	a) Non-Federal Account (from Schedule H3)	0.00	0.00
(k	b) Levin Funds (from Schedule H5)	0.00	0.00
(0	c) Total Transfer (add 18(a) and 18(b)).	0.00	0.00
	otal Receipts (add Lines 11(d), 2, 13, 14, 15, 16, 17, and 18(c))	19689.61	19689.61
	otal Federal Receipts ubtract Line 18(c) from Line 19)	19689.61	19689.61

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 02/2003)

of Disbursements

4 / 18

	II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	perating Expenditures: — Shared Federal/Non-Federal —		
(α,	Activity (from Schedule H4)	0.00	0.00
	(i) Federal Share	0.00	0.00
	(ii) Non-Federal Share	0.00	0.00
(b)	Other Federal Operating	0.00	2.00
	Expenditures	0.00	0.00
(c)		0.00	0.00
ю т	(add 21(a)(i), (a)(ii) and (b))	0.00	0.00
	ansfers to Affiliated/Other Party	1309.66	1309.66
3. Co	ontributions to	1000.00	1000.00
Fe	ederal Candidates/Committeesd Other Political Committees	0.00	0.00
	dependent Expenditure		
(u	se Schedule E)	0.00	0.00
ნ. Co Co	pordinated Expenditures Made by Party	0.00	0.00
(u	ommittees (2 U.S.C. 441a(d)) se Schedule F)	0.00	0.00
с I -	on Denouments Made	0.00	0.00
o. LO	an Repayments Made	0.00	0.00
7 I.a	ans Made	0.00	0.00
_	efunds of Contributions To:		
(a)	Individuals/Persons Other Than Political Committees	0.00	0.00
	Than Folitical Committees		
(b)	Political Party Committees	10000.00	10000.00
(c)		0.00	0.00
	(such as PACs)	0.00	0.00
(d)		10000.00	10000.00
	(add Lines 28(a), (b), and (c))	10000.00	10000.00
9. Ot	her Disbursements	7925.36	7925.36
0 E	ederal Election Activity (2 LLS C 421(20))		
	ederal Election Activity (2 U.S.C 431(20)) a) Shared Federal Election Activity		
(6	(from Schedule H6)		
	(i) Federal Share	0.00	0.00
	,,	2.22	
	(ii) "Levin" Share	0.00	0.00
(l	o) Federal Election Activity Paid Entirely	0.00	0.00
	With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add	0.00	0.00
,	Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
1. T	otal Disbursements (add Lines 21(c), 22,		
	3, 24, 25, 26, 27, 28(d), 29 and 30(c))	19235.02	19235.02
2. T	otal Federal Disbursements		
(5	subtract Line 21(a)(ii) and Line 30(a)(ii) rom Line 31)	19235.02	19235.02

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) 5 / 18

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
Total Contributions (other than loans) from Line 11(d), page 3)	9689.61	9689.61
1. Total Contribution Refunds (from Line 28(d))	10000.00	10000.00
Net Contributions (other than loans) (subtract Line 34 from Line 33)	-310.39	-310.39
6. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	0.00	0.00
7. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
Net Operating Expenditures (subtract Line 37 from Line 36)	0.00	0.00

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 18 (check only one) 11a 11b 11c X 12 13 14 15 16 17
Any information copied from such Reports and Sta or for commercial purposes, other than using the r	atements may not be sold or used by any personame and address of any political committee	son for the purpose of soliciting contributions to solicit contributions from such committee.
NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL L	JNION NO. 295 PAC	
Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUCATION Mailing Address P O BOX 37800 City	FUND State Zip Code	Date of Receipt M M D D Y Y Y Y Y Y Y Y
WASHINGTON FEC ID number of contributing federal political committee. Name of Employer	DC 20013-4307 C Occupation	Amount of Each Receipt this Period 10000.00 CONTRIBUTION
Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 10000.00	7

SUBTOTAL of Receipts This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	•	10000.00

CHEDULE B (FEC FOIII 3X)		ate schedule(s)			R LINE eck onl	: NUMBE v one)	:H:		L	PAGE	7 / 18	3
 EMIZED DISBURSEMENTS	Detailed S	ategory of the ummary Page		À	21b 27	X 22 28a		23 28b	24 28	С	25 29	2 3
y Information copied from such Reports and Stater for commercial purposes, other than using the nam												
NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL UNI	ON NO. 29	5 PAC										
 Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC	CATION FU	ND							: SB2 ement			V
Mailing Address P O BOX 37800						0 1		1	3 /	2	0 ŏ 9	
City WASHINGTON	State DC	Zip Code 20013-4307				Amo	unt of	Each	Disbur			-
Purpose of Disbursement PENNY FUND ASSESSMENT Candidate Name			Ca	008 atego	ory/	L.				. 1	98.82	•
Office Sought: House Disburs	ement For: Primary Other (spec	General ify) ▼		Туре	•							
Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC	CATION FU	ND					of Di	sburs	: SB2 ement		6 2 0 ŏ 9	Y
Mailing Address P O BOX 37800						0 2			0		009	
City WASHINGTON	State DC	Zip Code 20013-4307				Amo	unt of	Each	Disbur			
Purpose of Disbursement PENNY FUND ASSESSMENTS				900		L.				2	213.00	_
Candidate Name				atego Type	-							
Office Sought: House Disburs	ement For: Primary Other (spec	General ify) ▼										
Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC	CATION FU	ND					of Di	sburs	: SB2 ement			V
Mailing Address P O BOX 37800						0 3	IVI .	1	0 /	. 2	0 ŏ 9	
City WASHINGTON	State DC	Zip Code 20013-4307				Amo	unt of	Each	Disbur			eriod
Purpose of Disbursement PENNY FUND ASSESSMENTS			_	908						2	01.61	
Candidate Name				atego Type								
Senate President	ement For: Primary Other (spec	General ify) ▼										
State: District:											13.43	

S	CHEDULE B (FEC Form 3X)	Use sepa	arate schedule(s)		FOR LINE	_	ER:		F	'AGE	8 / 18	1
П	EMIZED DISBURSEMENTS		category of the Summary Page		(check on 21b 27	X 22 28a		23 28b	24 280	. П	25 29	26
	y Information copied from such Reports and Statem for commercial purposes, other than using the name											
	NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL UNIC											
	Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC	CATION FL	JND			Date	e of Di	sburs	: SB22 ement	2.507	5	
	Mailing Address P O BOX 37800					0 ^M 4	1 ^M	1	4 /	^Y ^Y 2	0 0 9	Y
	WASHINGTON	State DC	Zip Code 20013-4307			Amo	ount o	f Each	Disburs			eriod
	Purpose of Disbursement PENNY FUND ASSESSMENTS Candidate Name				008 ategory/			•		20	09.72	
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼		Туре	-						
	Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC Mailing Address P O BOX 37800	CATION FL	JND			Date		sburs	SB22 ement		3 0 ŏ 9	Υ
		State	Zip Code			Amo	ount of	f Each	Disburs	sement	t this P	eriod
	WASHINGTON Purpose of Disbursement	DC	20013-4307	_	• •		•	•		2:	35.64	•
	PENNY FUND ASSESSMENTS Candidate Name				008 ategory/ Type							
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼									
	Full Name (Last, First, Middle Initial) UNITED ASSOCIATION POLITICAL EDUC	CATION FL	JND			Date	e of Di	sburs	: SB22 ement			
	Mailing Address P O BOX 37800					OM	5 ^M	[′] C	9 /	ž	0 ŏ 9	Y
	City WASHINGTON	State DC	Zip Code 20013-4307			Amo	ount o	f Each	Disburs			eriod
	Purpose of Disbursement PENNY FUND ASSESSMENTS Candidate Name				008 ategory/ Type			•		2	50.87	•
	Office Sought: House Disburse Senate President State: District:	ement For: Primary Other (spe	General ecify) ▼									
Γ,	UBTOTAL of Disbursements This Page (optional)				•		•	•	•	69	96.23	
Г	OTAL This Period (last page this line number only)					F	•	*	•		09.66	-
1 '	The This I chou (last page this line number only)							-				_

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS Any Information copied from such Reports and Statement	for each category of the Detailed Summary Page (check of 21b 27)	28a X 28b 28c 29 30b
or for commercial purposes, other than using the name	, , , ,	· ' ·
NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL UNIC	DN NO. 295 PAC	
Full Name (Last, First, Middle Initial) FLORIDA DEMOCRATIC PARTY Mailing Address 104 WEST JEFFERSON	STREET	Transaction ID: SB28B.5091 Date of Disbursement Description of Description
7	State Zip Code FL 32301	Amount of Each Disbursement this Period
Purpose of Disbursement refund	010	10000.00
Candidate Name	Category/ Type	
Office Sought: House Disburser Senate President	ment For: Primary General Other (specify) ▼	
State: District:		

SUBTOTAL of Disbursements This Page (optional)	•	10000.00
TOTAL This Period (last page this line number only)	—	10000.00

TEMIZED DISBURSEMENTS Tore each category of the commercial purposes, other than using the name and address of any pollical committee to sellicit contributions from such Reports and Statements may not be add or used by any present for the purpose of soliciting contributions from such committee to sellicit contributions from such committee. NAME OF COMMITTEE (In Full)			(FEC FOIII 3	·		rate schedule(s)				NUMBE	.n.			PAGE	10 / 1	0
NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL UNION NO. 295 PAC Full Name (Last, First, Middle Initial) Adam Fetterman Campaign Account Mailing Address 481 SW Port St Lucie Blvd Suite B City State Zip Code Port St. Lucie FL 34953 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code Primary General Primary General Primary General Primary General Primary General Other (specify) ▼ Transaction ID: SB29.5071 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement this Perio State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code FL 32336-0002 Purpose of Disbursement Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement this Perio Transaction ID: SB29.5072 Date of Disbursement Date of Disbursemen	IT	EMIZED DIS	BURSEMEN [*]	TS					21b	22	_					
Full Name (Last, First, Middle Initial) Adam Fetterman Campaign Account Mailing Address 481 SW Port St Lucie Blvd Suite B City Port St Lucie President State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City City State: Disbursement State: Disbursement State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City City Senate President State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City City State: Disbursement For: Senate President State: Disbursement For: Senate President State: Disbursement Transaction ID: SB29.5071 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement this Perio Transaction ID: SB29.5072 Date of Disbursement this Perio Senate President State: Disbursement For: Senate President State: Disbursement For: Senate President State: Disbursement For: Senate President Other (specify) ▼ Amount of Each Disbursement Transaction ID: SB29.5072 Date of Disbursement Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Date of Disbursement Disbursement Date of Disburse																
Adam Fetterman Campaign Account Mailing Address 481 SW Port St Lucie Blvd Suite B City Port St. Lucie Port St. Lucie FL 34953 Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City Fludderdale FL 32336-0002 Flugose of Disbursement For: Purpose of Disbursement TayEt Exprense Office Sought: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City Fludderdale Flugose of Disbursement TayEt Exprense Office Sought: Full Name (Last, First, Middle Initial) American Express Mailing Address Primary General Office Sought: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City Furpose of Disbursement TayEt Exprense Mailing Address P. O. Box 36002 City Furpose of Disbursement For: Primary General Office Sought: Office Sought: Disbursement TayEt Exprense Catlegory/ Type Office Sought: Disbursement Office Sought: Disbursement For: Disbursement Office Sought: Disbursement Office Sought: Disbursement For: Disbursement Office Sought: Disburs	\rangle		` ,	CAL UNIO	N NO. 29	5 PAC										
Suite B City State	<u> </u>	, ,	. ,	unt						Date	of Dis	burse	ement			
Port St. Lucie Purpose of Disbursement CONTRIBUTION Candidate Name Office Sought: State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address Purpose of Disbursement FL State Disbursement FL State Primary General Other (specify) Transaction ID: SB29.5071 Date of Disbursement FL S2336-0002 City Ft Lauderdale FL Senate Primary General Purpose of Disbursement TRAVEL EXPENSE Candidate Name Disbursement For: Senate Primary General Primary Office Sought: Disbursement this Perio Amount of Each Disbursement this Perio Transaction ID: SB29.5071 Date of Disbursement For: Senate Primary Other (specify) Amount of Each Disbursement Disbursement Office Sought: Disbursement Disbursement FL S2336-0002 Amount of Each Disbursement this Perio Category/ Type Office Sought: Disbursement TRAVEL EXPENSE Candidate Name Disbursement TRAVEL EXPENSE Candidate Name Disbursement For: Senate Purpose of Disbursement TRAVEL EXPENSE Candidate Name Disbursement For: Senate Purpose of Disbursement TRAVEL EXPENSE Candidate Name Disbursement For: Senate Purpose of Disbursement Disbu		Mailing Address		Lucie Blvo	j					0 2	М /	2	4	y y	0 Ŏ 9	Y
CONTRIBUTION Candidate Name Office Sought:		Port St. Lucie								Amou	ınt of	Each	Disbur			-
Office Sought:		CONTRIBUTION	ement				_	-	_					3	00.00	
Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code FL auderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: President State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City Ft Lauderdale President State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code FL 32336-0002 City State FL 32336-0002 City St		Office Sought:	Senate President	F	Primary			_	•							
City Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Transaction ID: SB29.5072 Date of Disbursement TRAVEL EXPENSE Candidate Name Other (specify) ▼ Transaction ID: SB29.5072 Date of Disbursement Transaction ID: SB29.5072 Date of Disbursement Mailing Address P. O. Box 36002 City State Zip Code FL auderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Disbursement For: Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Office Sought: House Senate Primary General Other (specify) ▼ Office Sought: President Other (specify) ▼		Full Name (Last, Fir	st, Middle Initial)							Date	of Dis	burse	ement			
Ft Lauderdale Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General President Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Transaction ID: SB29.5072 Date of Disbursement Odd M		Mailing Address	P. O. Box 36002	2							М /	^D 2	6 /	y ž	0 0 9	Y
TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Perior Type Office Sought: House Disbursement For: General Other (specify) ▼ Other (specify) ▼ Other (specify) ▼ Transaction ID: SB29.5072 Date of Disbursement this Perior Category/ Type Office Sought: House Disbursement For: General Other (specify) ▼										Amou	ınt of	Each	Disbur			erio
Office Sought: House		TRAVEL EXPENSI						-						5	42.07	
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Office Sought: House Senate Primary General Other (specify) ▼			711	D'alaman				_	-							
Full Name (Last, First, Middle Initial) American Express Mailing Address P. O. Box 36002 City State Zip Code Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) Type Transaction ID: SB29.5072 Date of Disbursement Mailing Address P. O. Box 36002 Amount of Each Disbursement this Perior Category/ Type Office Sought: Primary General Other (specify) Type			Senate President	F	Primary											
City State Zip Code Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General President Other (specify) City Code 32336-0002 Amount of Each Disbursement this Perion Amount of Each Disbursement this Perion Category/ Type Other (specify) Category/ Type		Full Name (Last, Fir	st, Middle Initial)							Date	of Dis	burse	ement			
Ft Lauderdale FL 32336-0002 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General President President President Disbursement For: Senate Primary General Other (specify) ▼		Mailing Address	P. O. Box 36002	2						0 3	M /	^D 2	6	Ý Ž	0 Ď 9	Y
TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary President Other (specify) Type		Ft Lauderdale								Amou	ınt of	Each	Disbur			erio
Office Sought: Disbursement For: Senate Primary Other (specify) President Disbursement For: Primary General Other (specify)		TRAVEL EXPENSI												2	14.61	
Senate Primary General President Other (specify) ▼				6.1												
State: District:			Senate President	F	Primary											
		State: [District:													

SCHEDOLL B (I LC I OIIII 3X)	Use separate schedule(s) (chec	LINE NUMBER: PAGE 11 / 18 ek only one)
ITEMIZED DISBURSEMENTS	for each category of the	1b 22 23 24 25
Any Information copied from such Reports and State or for commercial purposes, other than using the national NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL U	ame and address of any political committee	
Full Name (Last, First, Middle Initial) BATTEN MADEWELL CPA LLC Mailing Address 1326 S RIDGEWOOD	AVE	Transaction ID: SB29.5043 Date of Disbursement M M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUITE 18 City DAYTONA BEACH	State Zip Code FL 32114-6190	Amount of Each Disbursement this Period
Purpose of Disbursement ACCOUNTING SERVICES Candidate Name	001 Category	125.00
Office Sought: House Senate President State: District:	Type rsement For: Primary Other (specify) ▼	
Full Name (Last, First, Middle Initial) BATTEN MADEWELL CPA LLC		Transaction ID: SB29.5045 Date of Disbursement
Mailing Address 1326 S RIDGEWOOD SUITE 18	AVE	0 2 0 0 9
City DAYTONA BEACH	State Zip Code FL 32114-6190	Amount of Each Disbursement this Period
Purpose of Disbursement ACCOUNTING FEES Candidate Name	001 Category Type	62.50
Office Sought: House Disbut Senate President State: District:	rsement For: Primary General Other (specify)	
Full Name (Last, First, Middle Initial) BATTEN MADEWELL CPA LLC		Transaction ID: SB29.5065 Date of Disbursement
Mailing Address 1326 S RIDGEWOOD SUITE 18	AVE	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City DAYTONA BEACH	State Zip Code FL 32114-6190	Amount of Each Disbursement this Perio
Purpose of Disbursement ACCOUNTING FEES Candidate Name	001 Category	125.00
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NAME OF COMMITTEE (In Full) NAME OF COMMITTEE (In Full) PLUMBERS & PIPEHITTERS LOCAL UNION NO. 295 PAC Full Name (Last, First, Middle Initial) BRETT MIRSKY Mailing Address 1225 EDNA DRIVE City Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House PORT ORANGE FL 32129 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary Office Sought: House Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary Office Sought: Senate Primary Office Sought: Senate Primary Office Sought: Senate President State: District: Full Name (Last, First, Middle Initial) Universement Travel Expense Office Sought: House Senate Primary Office Sought: Senate Primary Office Sought: House Senate Primary Office Sought: House Senate President State: District: Full Name (Last, First, Middle Initial) Universement Travel Expense Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Category/ Type Office Sought: House Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Category/ Type Office Sought: House President Other (specify) ▼ Amount of Each Disbursement this Peric Category/ Type Office Sought: House President Other (specify) ▼	TEMIZED DISBURSEMENTS				21b	22 🔲			
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Date of Disbursement Mailing Address 1225 EDNA DRIVE City PORT ORANGE FL 32129 Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House Primary General Other (specify) ▼ Mailing Address 743 N BEACH STREET City DAYTONA BEACH FL 32114 Purpose of Disbursement Candidate Name Disbursement For: State Zip Code Disbursement State Zip Code Disbursement Disbursement For: Senate Primary General Disbursement Disbursement Mailing Address 743 N BEACH STREET City DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Disbursement M M D D D D D D D D D D D D D D D D D						Transacti	on ID: SR	29 5084	
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PORT ORANGE Purpose of Disbursement TRAVEL EXPENSE Candidate Name Office Sought: House President State: District: Full Name (Last, First, Middle Initial) UA LOCAL UNION 295 Mailling Address Transaction ID: SB29.5063 Date of Disbursement Other (specify) Type Transaction ID: SB29.5063 Date of Disbursement Other (specify) Amount of Each Disbursement this Peric TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Disbursement For: Senate Primary General O02 Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify)	Mailing Address 1225 EDNA DRIVE					0.5	0 5	200	9
TRAVEL EXPENSE Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) UA LOCAL UNION 295 Mailing Address 743 N BEACH STREET City DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Office Sought: House Primary General Other (specify) ▼ Office Sought: Primary General Other (specify) ▼ Amount of Each Disbursement this Peric Category/ Type Office Sought: Primary General Other (specify) ▼						Amount o	f Each Disbu		
Office Sought: House Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) UA LOCAL UNION 295 Mailing Address 743 N BEACH STREET City DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Disbursement For: Senate Primary General Other (specify) ▼ Office Sought: House Senate Primary General Other (specify) ▼	TRAVEL EXPENSE							352.	00
Senate Primary General Other (specify) ▼ State: District: Full Name (Last, First, Middle Initial) UA LOCAL UNION 295 Mailing Address 743 N BEACH STREET City State Zip Code DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Senate Primary General Other (specify) ▼ Other (specify) ▼ Transaction ID: SB29.5063 Date of Disbursement Amount of Each Disbursement this Period Category/ Type Office Sought: Primary General Other (specify) ▼		_		_	-				
Full Name (Last, First, Middle Initial) UA LOCAL UNION 295 Mailing Address 743 N BEACH STREET City State Zip Code DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Disbursement For: Senate Primary General Other (specify) Other (specify)	Senate President	Primary							
City State Zip Code DAYTONA BEACH FL 32114 Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Senate Primary General Other (specify) Total Content of the primary General Other (specify) Total Content of	Full Name (Last, First, Middle Initial)					Date of D	isbursement		
DAYTONA BEACH Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Senate Primary President Disbursement For: Senate Primary Other (specify) Type	Mailing Address 743 N BEACH STREE	ΞT				0 2	26	žoč	9
TRAVEL EXPENSE REIMBURSEMENT Candidate Name Office Sought: House Senate Primary President Other (specify)	City DAYTONA BEACH					Amount o	f Each Disbu		
Office Sought: Disbursement For: Senate Primary Other (specify) Type Type				002	2			452.	80
Senate Primary General President Other (specify) ▼									
State: District:	Senate	Primary							

SCHEDULE B (FEC FOIII 3X)	Use separate schedule(s) FOR LINE (check only	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 27	22 23 24 25 28 28b 28c X 29
Any Information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMUNITY (1.5.1)			
NAME OF COMMITTEE (In Full) PLUMBERS & PIPEFITTERS LOCAL	L UNION NO. 295 PAC		
Full Name (Last, First, Middle Initial) UA LOCAL UNION 295			Transaction ID: SB29.5076 Date of Disbursement
Mailing Address 743 N BEACH STF	REET		$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ D & 1 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & O & O & P \\ 2 & 0 & O & 9 \end{smallmatrix} \end{bmatrix}$
City DAYTONA BEACH	State Zip Code FL 32114		Amount of Each Disbursement this Perio
Purpose of Disbursement DELEGATE EXPENSE REIMBURSEMEN	Т	007	450.00
Candidate Name Office Sought: House D	inhuun aan ark Faur	Category/ Type	
Senate President	isbursement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) UA LOCAL UNION 295			Transaction ID: SB29.5080 Date of Disbursement
Mailing Address 743 N BEACH STF	REET		$\begin{bmatrix}\begin{smallmatrix}M&4&M\\0&4&M\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}D&2&D\\2&7\end{smallmatrix}\end{bmatrix}/\begin{bmatrix}\begin{smallmatrix}Y&2&0&0&9\\2&0&0&9\end{smallmatrix}\end{bmatrix}$
City DAYTONA BEACH	State Zip Code FL 32114		Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE REIMBURSEMENT		002	702.84
Candidate Name		Category/ Type	
Senate President	isbursement For: Primary General Other (specify)		
State: District: Full Name (Last, First, Middle Initial) OLIVER B. WINN, Jr.			Transaction ID: SB29.5086 Date of Disbursement
Mailing Address 278 SOUTH OLD R	KINGS ROAD		$\begin{bmatrix}\begin{smallmatrix}M\\0\\5\end{smallmatrix}\end{bmatrix}^M \begin{bmatrix}\begin{smallmatrix}D\\0\\5\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}D\\0\\5\end{smallmatrix}\end{bmatrix}^D \begin{bmatrix}\begin{smallmatrix}Y\\0\\0\end{smallmatrix}\end{bmatrix} \begin{bmatrix}\begin{smallmatrix}Y\\0\\0\end{smallmatrix}\end{bmatrix} \begin{bmatrix}Y\\0\end{smallmatrix}$
City ORMOND BEACH	State Zip Code FL 32174		Amount of Each Disbursement this Period
Purpose of Disbursement TRAVEL EXPENSE		002	352.00
Candidate Name		Category/ Type	
Office Sought: House D Senate President	isbursement For: Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (op	tional)	>	1504.84
TOTAL This Period (last page this line number	er only)		7825.36