

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

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

2. **FEC IDENTIFICATION NUMBER** C00017194
3. IS THIS REPORT NEW (N) **OR** AMENDED (A)

4. **TYPE OF REPORT** (Choose One)
(a) Quarterly Reports:
 April 15 Quarterly Report(Q1)
 July 15 Quarterly Report(Q2)
 October 15 Quarterly Report(Q3)
 January 31 Quarterly Report(YE)
 July 31 Mid-Year Report(Non-election Year Only) (MY)
 Termination Report (TER)
(b) Monthly Report Due On:
 Feb 20 (M2) May 20 (M5) Aug 20 (M8) Nov 20 (M11) (Non-Election Year Only)
 Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) Dec 20 (M12) (Non-Election Year Only)
 Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE)
(c) 12-Day **PRE-Election** Report for the:
 Primary (12P) General (12G) Runoff (12R)
 Convention (12C) Special (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 07 01 2007 through 12 31 2007

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 Joseph Whittles

Signature of Treasurer Electronically Filed by Joseph Whittles Date 03 01 2008

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

| | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|
| Office Use Only | | | | | | | | | |
|-----------------|--|--|--|--|--|--|--|--|--|

FEC FORM 3X
(Rev. 12/2004)

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name

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

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| | COLUMN A This Period | COLUMN B Calendar Year-to-Date | | | | | | | | |
|---|-------------------------|-----------------------------------|---|---|---|---|---|---|--|-----------|
| 6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | Y | Y | Y | Y | 2 | 0 | 0 | 7 | | 142880.69 |
| Y | Y | Y | Y | | | | | | | |
| 2 | 0 | 0 | 7 | | | | | | | |
| (b) Cash on Hand at Beginning of Reporting Period | 85763.69 | | | | | | | | | |
| (c) Total Receipts (from Line 19) | 227705.40 | 353559.57 | | | | | | | | |
| (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) | 313469.09 | 496440.26 | | | | | | | | |
| 7. Total Disbursements (from Line 31) | 202328.89 | 385300.06 | | | | | | | | |
| 8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) | 111140.20 | 111140.20 | | | | | | | | |
| 9. Debts and Obligations owed TO the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |
| 10. Debts and Obligations owed BY the committee (Itemize all on Schedule C and/or Schedule D) | 0.00 | | | | | | | | | |

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

For further information contact:

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

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

**DETAILED SUMMARY PAGE
OF RECEIPTS**

Write or Type Committee Name

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

Report Covering the Period: From:

| | |
|---|---|
| M | M |
| 0 | 7 |

| | |
|---|---|
| D | D |
| 0 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

 To:

| | |
|---|---|
| M | M |
| 1 | 2 |

| | |
|---|---|
| D | D |
| 3 | 1 |

| | | | |
|---|---|---|---|
| Y | Y | Y | Y |
| 2 | 0 | 0 | 7 |

| 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 | 0.00 | 0.00 |
| (i) Itemized (use Schedule A) | 204358.54 | 329816.78 |
| (ii) Unitemized | 204358.54 | 329816.78 |
| (iii) TOTAL (add Lines 11(a)(i) and (ii) | 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 Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) | 204358.54 | 329816.78 |
| 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 | 23211.89 | 23211.89 |
| 17. Other Federal Receipts (Dividends, Interest, etc.) | 134.97 | 530.90 |
| 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)) | 227705.40 | 353559.57 |
| 20. Total Federal Receipts (subtract Line 18(c) from Line 19) | 227705.40 | 353559.57 |

DETAILED SUMMARY PAGE

of Disbursements

| 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..... | 29150.89 | 38540.59 |
| (c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... | 29150.89 | 38540.59 |
| 22. Transfers to Affiliated/Other Party Committees..... | 0.00 | 50000.00 |
| 23. Contributions to Federal Candidates/Committees and Other Political Committees..... | 43500.00 | 57000.00 |
| 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..... | 129678.00 | 239759.47 |
| 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)).. | 202328.89 | 385300.06 |
| 32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)..... | 202328.89 | 385300.06 |

DETAILED SUMMARY PAGE
of Disbursements

| 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 | 204358.54 | 329816.78 |
| 34. Total Contribution Refunds (from Line 28(d)) | 0.00 | 0.00 |
| 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) | 204358.54 | 329816.78 |
| 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))..... | 29150.89 | 38540.59 |
| 37. Offsets to Operating Expenditures (from Line 15, page 3) | 0.00 | 0.00 |
| 38. Net Operating Expenditures (subtract Line 37 from Line 36) | 29150.89 | 38540.59 |

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

| | |
|---|---|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: PAGE 6 / 45 |
| | (check only one) |
| <input type="checkbox"/> 11a | <input type="checkbox"/> 11b |
| <input type="checkbox"/> 13 | <input type="checkbox"/> 14 |
| <input type="checkbox"/> 11c | <input type="checkbox"/> 12 |
| <input type="checkbox"/> 15 | <input checked="" type="checkbox"/> 16 |
| | <input type="checkbox"/> 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)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.

| | | |
|---|-----------------------------|--|
| Full Name (Last, First, Middle Initial) Committee to Re-elect Justice Karen Peters | | Date of Receipt |
| Mailing Address 58 Norma Court | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 09 / 12 / 2007 |
| City | State | Zip Code |
| Kingston | NY | 12401 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA16.5744 |
| C <input type="text"/> | | Amount of Each Receipt this Period |
| | | <input type="text"/> 711.89 |
| Name of Employer | Occupation | Refund portion of 2006 campaign expense |
| Receipt For: 2007 | Aggregate Year-to-Date ▼ | |
| <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General | <input type="text"/> 711.89 | |
| <input type="checkbox"/> Other (specify) ▼ | | |

B.

| | | |
|---|-------------------------------|--|
| Full Name (Last, First, Middle Initial) NY ST CONF OF THE INT'L UNION OF OPERATING ENGINEERS FED VPAF (NYS CONF IUOE FED VPAF) | | Date of Receipt |
| Mailing Address 111 WASHINGTON AVENUE SUITE 201 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 12 / 31 / 2007 |
| City | State | Zip Code |
| ALBANY | NY | 12210 |
| FEC ID number of contributing federal political committee. | | Transaction ID: SA16.5748 |
| C C00426163 | | Amount of Each Receipt this Period |
| | | <input type="text"/> 22500.00 |
| Name of Employer | Occupation | Refund for convention participation |
| Receipt For: 2007 | Aggregate Year-to-Date ▼ | |
| <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General | <input type="text"/> 22500.00 | |
| <input type="checkbox"/> Other (specify) ▼ | | |

| | |
|--|-------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 23211.89 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 23211.89 |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

| | | |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 7 / 45 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

| | | | |
|---|---|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5755 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="40.44"/> |
| | | <input type="text" value="436.37"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="07"/> / <input type="text" value="31"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5760 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="0.36"/> |
| | | <input type="text" value="436.73"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5750 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="1.07"/> |
| | | <input type="text" value="437.80"/> | Interest Earned |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="41.87"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 8 / 45 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

| | | | |
|---|---|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="08"/> / <input type="text" value="27"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5761 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="0.58"/> |
| | | <input type="text" value="438.38"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5751 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="0.95"/> |
| | | <input type="text" value="439.33"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="09"/> / <input type="text" value="24"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5756 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="27.71"/> |
| | | <input type="text" value="467.04"/> | Interest Earned |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="29.24"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

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

| | | |
|---|--|-------------|
| Use separate schedule(s) for each category of the Detailed Summary Page | FOR LINE NUMBER: (check only one) | PAGE 9 / 45 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

| | | | |
|---|---|-------------------------------------|---|
| A. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5752 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="0.83"/> |
| | | <input type="text" value="467.87"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| B. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5757 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="19.46"/> |
| | | <input type="text" value="487.33"/> | Interest Earned |

| | | | |
|---|---|-------------------------------------|---|
| C. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5753 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text" value="0.95"/> |
| | | <input type="text" value="488.28"/> | Interest Earned |

| | |
|--|------------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text" value="21.24"/> |
| TOTAL This Period (last page this line number only) | <input type="text"/> |

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

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

FOR LINE NUMBER: PAGE 10 / 45
(check only one)

11a 11b 11c 12
 13 14 15 16 17

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

A.

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

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.22

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA17.5758

Amount of Each Receipt this Period
23.94

Interest Earned

B.

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

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.60

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA17.5762

Amount of Each Receipt this Period
0.38

Interest Earned

C.

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

Mailing Address NC8502
P.O. BOX 563966

City State Zip Code
CHARLOTTE NC 28262-3966

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

Name of Employer Occupation

Receipt For:
 Primary General
 Other (specify) ▼

Aggregate Year-to-Date ▼
512.99

Date of Receipt
MM / DD / YYYY
11 / 29 / 2007

Transaction ID: SA17.5763

Amount of Each Receipt this Period
0.39

Interest Earned

SUBTOTAL of Receipts This Page (optional) ► **24.71**

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: (check only one) | PAGE 11 / 45 |
| | <input type="checkbox"/> 11a <input type="checkbox"/> 11b <input type="checkbox"/> 11c <input type="checkbox"/> 12 <input type="checkbox"/> 13 <input type="checkbox"/> 14 <input type="checkbox"/> 15 <input type="checkbox"/> 16 <input checked="" type="checkbox"/> 17 | |

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

| | | | |
|---|---|-----------------------------|---|
| A. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 1 / 2 9 / 2 0 0 7 |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5764 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 0.48 |
| | | <input type="text"/> 513.47 | Interest Earned |

| | | | |
|---|---|-----------------------------|---|
| B. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7 |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5754 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 1.00 |
| | | <input type="text"/> 514.47 | Interest Earned |

| | | | |
|---|---|-----------------------------|---|
| C. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | | Date of Receipt |
| | Mailing Address NC8502 P.O. BOX 563966 | | <input type="text"/> M M / <input type="text"/> D D / <input type="text"/> Y Y Y Y Y 1 2 / 3 1 / 2 0 0 7 |
| | City | State | Zip Code |
| | CHARLOTTE | NC | 28262-3966 |
| | FEC ID number of contributing federal political committee. C | | Transaction ID: SA17.5759 |
| Name of Employer | | Occupation | Amount of Each Receipt this Period |
| Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | Aggregate Year-to-Date ▼ | <input type="text"/> 16.43 |
| | | <input type="text"/> 530.90 | Interest Earned |

| | |
|--|--------------------------------|
| SUBTOTAL of Receipts This Page (optional) | <input type="text"/> 17.91 |
| TOTAL This Period (last page this line number only) | <input type="text"/> 134.97 |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | | |
|--|--|--|
| A. | Full Name (Last, First, Middle Initial) MOORE STEPHENS. P.C. | Transaction ID: SB21B.5903 Date of Disbursement 08 / 15 / 2007 |
| | Mailing Address 340 North Avenue | Amount of Each Disbursement this Period 9325.00 |
| | City Cranford State NJ Zip Code 07016 | 001 Category/ Type |
| | Purpose of Disbursement PAC Reports Preparation 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) MOORE STEPHENS. P.C. | Transaction ID: SB21B.5904 Date of Disbursement 08 / 15 / 2007 |
| | Mailing Address 340 North Avenue | Amount of Each Disbursement this Period 2500.00 |
| | City Cranford State NJ Zip Code 07016 | 001 Category/ Type |
| | Purpose of Disbursement PAC Reports Preparation 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) MOORE STEPHENS. P.C. | Transaction ID: SB21B.5909 Date of Disbursement 12 / 14 / 2007 |
| | Mailing Address 340 North Avenue | Amount of Each Disbursement this Period 1500.00 |
| | City Cranford State NJ Zip Code 07016 | 001 Category/ Type |
| | Purpose of Disbursement PAC Reports Preparation 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) ▶

13325.00

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

| | | | | | | | | | | | | | | | | | | | | | |
|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| A. | Full Name (Last, First, Middle Initial) MOORE STEPHENS. P.C. | Transaction ID: SB21B.5910 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 340 North Avenue | <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>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 2 | | 1 | 4 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 2 | | 1 | 4 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City Cranford State NJ Zip Code 07016 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement PAC Reports Preparation Candidate Name | <table border="1"><tr><td>1500.00</td></tr></table> | 1500.00 | | | | | | | | | | | | | | | | | | |
| 1500.00 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"><tr><td>001</td></tr></table> Category/Type | 001 | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| B. | Full Name (Last, First, Middle Initial) MOORE STEPHENS. P.C. | Transaction ID: SB21B.5911 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 340 North Avenue | <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>1</td><td>2</td><td></td><td>1</td><td>4</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 2 | | 1 | 4 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 2 | | 1 | 4 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City Cranford State NJ Zip Code 07016 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement PAC Reports Preparation Candidate Name | <table border="1"><tr><td>4000.00</td></tr></table> | 4000.00 | | | | | | | | | | | | | | | | | | |
| 4000.00 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"><tr><td>001</td></tr></table> Category/Type | 001 | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |

| | | | | | | | | | | | | | | | | | | | | | |
|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| C. | Full Name (Last, First, Middle Initial) Progress Printing Company, Inc. | Transaction ID: SB21B.5907 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 338 Montgomery Street P.O. Box 442 | <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>1</td><td>1</td><td></td><td>1</td><td>5</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 1 | 1 | | 1 | 5 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City Jersey City State NJ Zip Code 07302 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement PAC Office Supplies Candidate Name | <table border="1"><tr><td>2747.00</td></tr></table> | 2747.00 | | | | | | | | | | | | | | | | | | |
| 2747.00 | | | | | | | | | | | | | | | | | | | | | |
| | 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) ▼ | | | | | | | | | | | | | | | | | | | |
| | | <table border="1"><tr><td>001</td></tr></table> Category/Type | 001 | | | | | | | | | | | | | | | | | | |
| 001 | | | | | | | | | | | | | | | | | | | | | |

| | | |
|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1"><tr><td>8247.00</td></tr></table> | 8247.00 |
| 8247.00 | | |
| 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)

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

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NAME OF COMMITTEE (In Full)

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

A.

Full Name (Last, First, Middle Initial)
Progress Printing Company, Inc.

Transaction ID: SB21B.5908

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 1 | | 1 | 5 | | 2 | 0 | 7 | |

Mailing Address 338 Montgomery Street
P.O. Box 442

Amount of Each Disbursement this Period

| |
|---------|
| 2714.00 |
|---------|

City Jersey City State NJ Zip Code 07302

Purpose of Disbursement
PAC Office Supplies

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
PURCHASE POWER

Transaction ID: SB21B.5898

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 1 | 0 | | 3 | 0 | | 2 | 0 | 7 | |

Mailing Address P.O. BOX 856042

Amount of Each Disbursement this Period

| |
|---------|
| 2800.00 |
|---------|

City LOUISVILLE State KY Zip Code 40285

Purpose of Disbursement
Postage Expense

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
TRAVELERS INSURANCE

Transaction ID: SB21B.5905

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 1 | 7 | | 2 | 0 | 7 | |

Mailing Address CL Remittance Center

Amount of Each Disbursement this Period

| |
|---------|
| 1590.00 |
|---------|

City Hartford State CT Zip Code 06183

Purpose of Disbursement
PAC Insurance

| |
|-------------------|
| 001 |
| Category/ Type |

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

| |
|---------|
| 7104.00 |
|---------|

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)

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

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

Mailing Address NC8502
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement
Bank Charges
Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.5775
Date of Disbursement

07 / 31 / 2007

Amount of Each Disbursement this Period

5.00

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

Mailing Address NC8502
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement
Bank Charges
Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.5765
Date of Disbursement

08 / 27 / 2007

Amount of Each Disbursement this Period

25.00

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

Mailing Address NC8502
P.O. BOX 563966

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement
Bank Charges
Candidate Name

001
Category/
Type

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

Transaction ID: SB21B.5770
Date of Disbursement

08 / 27 / 2007

Amount of Each Disbursement this Period

40.67

SUBTOTAL of Disbursements This Page (optional)

70.67

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

A.

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

Transaction ID: SB21B.5777

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 8 | | 2 | 7 | | 2 | 0 | 7 | |

Mailing Address NC8502
P.O. BOX 563966

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charges

Candidate Name

| |
|-------------------|
| 001 |
| Category/ Type |

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

B.

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

Transaction ID: SB21B.5766

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 4 | | 2 | 0 | 7 | |

Mailing Address NC8502
P.O. BOX 563966

Amount of Each Disbursement this Period

| |
|------|
| 5.00 |
|------|

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charges

Candidate Name

| |
|-------------------|
| 001 |
| Category/ Type |

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

C.

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

Transaction ID: SB21B.5771

Date of Disbursement

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| M | M | / | D | D | / | Y | Y | Y | Y |
| 0 | 9 | | 2 | 4 | | 2 | 0 | 7 | |

Mailing Address NC8502
P.O. BOX 563966

Amount of Each Disbursement this Period

| |
|-------|
| 41.34 |
|-------|

City CHARLOTTE State NC Zip Code 28262-3966

Purpose of Disbursement

Bank Charges

Candidate Name

| |
|-------------------|
| 001 |
| Category/ Type |

Office Sought: House
 Senate
 President

Disbursement For: Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

| |
|-------|
| 51.34 |
|-------|

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

| |
|--|
| |
|--|

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

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | Transaction ID: SB21B.5767 Date of Disbursement |
| | Mailing Address NC8502 P.O. BOX 563966 | <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2007"/> |
| | City CHARLOTTE State NC Zip Code 28262-3966 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bank Charges Candidate Name | <input type="text" value="25.00"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="001"/> Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | Transaction ID: SB21B.5772 Date of Disbursement |
| | Mailing Address NC8502 P.O. BOX 563966 | <input type="text" value="10"/> / <input type="text" value="22"/> / <input type="text" value="2007"/> |
| | City CHARLOTTE State NC Zip Code 28262-3966 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bank Charges Candidate Name | <input type="text" value="35.60"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="001"/> Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. | Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. | Transaction ID: SB21B.5768 Date of Disbursement |
| | Mailing Address NC8502 P.O. BOX 563966 | <input type="text" value="11"/> / <input type="text" value="29"/> / <input type="text" value="2007"/> |
| | City CHARLOTTE State NC Zip Code 28262-3966 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Bank Charges Candidate Name | <input type="text" value="25.00"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="001"/> Category/ Type |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional) ▶

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | |
|--|---|
| A. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. <hr/> Mailing Address NC8502 P.O. BOX 563966 <hr/> City CHARLOTTE State NC Zip Code 28262-3966 <hr/> Purpose of Disbursement Bank Charges Candidate Name | Transaction ID: SB21B.5773 Date of Disbursement 11 / 29 / 2007 |
| | Amount of Each Disbursement this Period 38.17 |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: |
| B. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. <hr/> Mailing Address NC8502 P.O. BOX 563966 <hr/> City CHARLOTTE State NC Zip Code 28262-3966 <hr/> Purpose of Disbursement Bank Charges Candidate Name | Transaction ID: SB21B.5778 Date of Disbursement 11 / 29 / 2007 |
| | Amount of Each Disbursement this Period 5.00 |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: |
| C. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC. <hr/> Mailing Address NC8502 P.O. BOX 563966 <hr/> City CHARLOTTE State NC Zip Code 28262-3966 <hr/> Purpose of Disbursement Bank Charges Candidate Name | Transaction ID: SB21B.5779 Date of Disbursement 11 / 29 / 2007 |
| | Amount of Each Disbursement this Period 5.00 |
| | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: |

SUBTOTAL of Disbursements This Page (optional) ▶

48.17

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

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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | |
|--|---|
| <p>A. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.</p> <p>Mailing Address NC8502 P.O. BOX 563966</p> <p>City CHARLOTTE State NC Zip Code 28262-3966</p> <p>Purpose of Disbursement Bank Charges 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.5780 Date of Disbursement 11 / 29 / 2007</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>001 Category/Type</p> |
| <p>B. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.</p> <p>Mailing Address NC8502 P.O. BOX 563966</p> <p>City CHARLOTTE State NC Zip Code 28262-3966</p> <p>Purpose of Disbursement Bank Charges 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.5769 Date of Disbursement 12 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 5.00</p> <p>001 Category/Type</p> |
| <p>C. Full Name (Last, First, Middle Initial) WACHOVIA BANK, NATIONAL ASSOC.</p> <p>Mailing Address NC8502 P.O. BOX 563966</p> <p>City CHARLOTTE State NC Zip Code 28262-3966</p> <p>Purpose of Disbursement Bank Charges 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.5774 Date of Disbursement 12 / 31 / 2007</p> <p>Amount of Each Disbursement this Period 43.11</p> <p>001 Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

53.11

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

28984.89

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

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) ENGINEERS POLITICAL EDUCATION COMMITTEE (EPEC)/INTERNATIONAL UNION OF OPERATING ENGINEER | Transaction ID: SB23.5899 |
| | Mailing Address 1125 17th St NW | Date of Disbursement MM / DD / YYYY 08 / 02 / 2007 |
| | City Washington State DC Zip Code 20036 | Amount of Each Disbursement this Period 20000.00 |
| | Purpose of Disbursement Direct Contribution Candidate Name | 011 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|---|--|
| B. | Full Name (Last, First, Middle Initial) MAURICE D HINCHEY | Transaction ID: SB23.5901 |
| | Mailing Address PO Box 4497 | Date of Disbursement MM / DD / YYYY 12 / 05 / 2007 |
| | City Kingston State NY Zip Code 12402 | Amount of Each Disbursement this Period 500.00 |
| | Purpose of Disbursement Reception Candidate Name MAURICE D HINCHEY | 011 Category/Type |
| | Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: NY District: 22 | Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) NY ST CONF OF THE INT'L UNION OF OPERATING ENGINEERS FED VPAF (NYS CONF IUOE FED VPAF) | Transaction ID: SB23.5900 |
| | Mailing Address 111 WASHINGTON AVENUE SUITE 201 | Date of Disbursement MM / DD / YYYY 08 / 29 / 2007 |
| | City ALBANY State NY Zip Code 12210 | Amount of Each Disbursement this Period 23000.00 |
| | Purpose of Disbursement Direct Contribution Candidate Name | 011 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | |
|--|-----------------|
| SUBTOTAL of Disbursements This Page (optional) | 43500.00 |
| TOTAL This Period (last page this line number only) | 43500.00 |

**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)

PAGE 22 / 45

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

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NAME OF COMMITTEE (In Full)

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

| | |
|---|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Atlantic & Cape May County CLC Cope Fund</p> <p>Mailing Address P.O. Box 1118</p> <p>City Hammonton State NJ Zip Code 08037</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5801</p> <p>Date of Disbursement 08 / 06 / 2007</p> <p>Amount of Each Disbursement this Period 3500.00</p> <p>011 Category/Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) BERGEN COPE</p> <p>Mailing Address 205 Robin Road Suite 220</p> <p>City Paramus State NJ Zip Code 07652</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5820</p> <p>Date of Disbursement 10 / 05 / 2007</p> <p>Amount of Each Disbursement this Period 1100.00</p> <p>011 Category/Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) Bergen County Democratic Organization</p> <p>Mailing Address 50 Main Street</p> <p>City Hackensack State NJ Zip Code 07601</p> <p>Purpose of Disbursement Direct Contribution Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5842</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 5000.00</p> <p>011 Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

9600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

| | |
|--|--|
| <p>A.</p> <p>Full Name (Last, First, Middle Initial) Bob Gordon for Senate</p> <p>Mailing Address 354 Plaza Road North</p> <p>City Fair Lawn State NJ Zip Code 07410</p> <p>Purpose of Disbursement Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB29.5825</p> <p>Date of Disbursement 10 / 15 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p> |
| <p>B.</p> <p>Full Name (Last, First, Middle Initial) CAMDEN COUNTY DEMOCRATIC COMMITTEE</p> <p>Mailing Address 2240-15 Route 70 West</p> <p>City Cherry Hill State NJ Zip Code 08002</p> <p>Purpose of Disbursement Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB29.5811</p> <p>Date of Disbursement 09 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p> |
| <p>C.</p> <p>Full Name (Last, First, Middle Initial) CHENANGO COUNTY REPUBLICAN COMMITTEE</p> <p>Mailing Address 72 WEST MAIN STREET</p> <p>City NORWICH State NY Zip Code 13815</p> <p>Purpose of Disbursement Reception</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> <p>State: District:</p> | <p>Transaction ID: SB29.5855</p> <p>Date of Disbursement 07 / 13 / 2007</p> <p>Amount of Each Disbursement this Period 600.00</p> <p>011 Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

4600.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
CITIZENS FOR TOM MORAHAN

Mailing Address P.O. Box 307

City State Zip Code
West Nyak NY 10994

Purpose of Disbursement
Outing

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.5864
Date of Disbursement

09 / 13 / 2007

Amount of Each Disbursement this Period

1200.00

B. Full Name (Last, First, Middle Initial)
CMTE. TO ELECT AILEEN GUNTHER

Mailing Address P.O. Box 793

City State Zip Code
Monticello NY 12701

Purpose of Disbursement
Reception

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.5854
Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CMTE. TO ELECT BRIAN DUBOIS

Mailing Address 1083 CR 114

City State Zip Code
Cochecton NY 12726

Purpose of Disbursement
Direct Contribution

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.5880
Date of Disbursement

10 / 11 / 2007

Amount of Each Disbursement this Period

300.00

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 25 / 45

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

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NAME OF COMMITTEE (In Full)

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

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) CMTE. TO ELECT ELWIN WOOD <hr/> Mailing Address P.O. Box 52 <hr/> City Roscoe State NY Zip Code 12776 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5858 Date of Disbursement 08 / 17 / 2007 |
| | Amount of Each Disbursement this Period 300.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) CMTE. TO ELECT J. MICHAEL BRUHN, JR <hr/> Mailing Address 189 Fairview Avenue <hr/> City Kingston State NY Zip Code 12401 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5888 Date of Disbursement 10 / 29 / 2007 |
| | Amount of Each Disbursement this Period 350.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) CMTE. TO ELECT JUDGE CINDY BARBER <hr/> Mailing Address P.O. Box 458 <hr/> City Ferndale State NY Zip Code 12734 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5881 Date of Disbursement 10 / 11 / 2007 |
| | Amount of Each Disbursement this Period 500.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

1150.00

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
CMTE. TO RE-ELECT FRANK DART

Mailing Address 135 Second Avenue

City Kingston State NY Zip Code 12401

Purpose of Disbursement
Direct Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5878

Date of Disbursement

10 / 11 / 2007

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
CMTE. TO RE-ELECT JIM CARROLL

Mailing Address PO BOX 94

City DEMAREST State NJ Zip Code 07627

Purpose of Disbursement
RECEPTION

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5828

Date of Disbursement

10 / 18 / 2007

Amount of Each Disbursement this Period

1000.00

C. Full Name (Last, First, Middle Initial)
CMTE. TO RE-ELECT LOMITA

Mailing Address P.O. Box 504

City Milton State NY Zip Code 12547

Purpose of Disbursement
Direct Contribution

Candidate Name

011
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5892

Date of Disbursement

10 / 29 / 2007

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

2000.00

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

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

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

FOR LINE NUMBER:
(check only one)

PAGE 29 / 45

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

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NAME OF COMMITTEE (In Full)

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

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) CMTE. TO RE-ELECT SAM WOHL <hr/> Mailing Address 61 Park Avenue <hr/> City Monticello State NY Zip Code 12701 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5860 Date of Disbursement M M / D D / Y Y Y Y 08 / 31 / 2007 |
| | Amount of Each Disbursement this Period 500.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) CMTE. TO RE-ELECT VINCENT PRIETO ASSEMBLY <hr/> Mailing Address 155 POLIFLY ROAD SUITE 103 <hr/> City HACKENSACK State NJ Zip Code 07601 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5822 Date of Disbursement M M / D D / Y Y Y Y 10 / 10 / 2007 |
| | Amount of Each Disbursement this Period 1500.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT JEANETTE PROVENZANO <hr/> Mailing Address 305 Hurley Avenue, 4E <hr/> City Kingston State NY Zip Code 12401 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5895 Date of Disbursement M M / D D / Y Y Y Y 10 / 29 / 2007 |
| | Amount of Each Disbursement this Period 500.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

2500.00

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

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

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

FOR LINE NUMBER:
(check only one)

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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)

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

| | | | |
|-----------|--|--|---------|
| A. | Full Name (Last, First, Middle Initial) COMMITTEE TO RE-ELECT CELLINI SUPERVISOR | Transaction ID: SB29.5896 Date of Disbursement 10 / 30 / 2007 | |
| | Mailing Address 5 Rosen Road | | |
| | City Monticello State NY Zip Code 12701 | Amount of Each Disbursement this Period | 2000.00 |
| | Purpose of Disbursement Direct Contribution | 011 Category/ Type | |
| | Candidate Name | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 | |
| | State: District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| B. | Full Name (Last, First, Middle Initial) Cumberland County Democratic Organization | Transaction ID: SB29.5786 Date of Disbursement 07 / 06 / 2007 | |
| | Mailing Address P.O. Box 812 | | |
| | City Vineland State NJ Zip Code 08362 | Amount of Each Disbursement this Period | 2000.00 |
| | Purpose of Disbursement Reception | 011 Category/ Type | |
| | Candidate Name | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 | |
| | State: District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |
| C. | Full Name (Last, First, Middle Initial) DEGISE 2007 | Transaction ID: SB29.5819 Date of Disbursement 10 / 03 / 2007 | |
| | Mailing Address 280 BALDWIN AVENUE | | |
| | City JERSEY CITY State NJ Zip Code 07306 | Amount of Each Disbursement this Period | 1000.00 |
| | Purpose of Disbursement Reception | 011 Category/ Type | |
| | Candidate Name | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President | Disbursement For: 2008 | |
| | State: District: | <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

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| SUBTOTAL of Disbursements This Page (optional) | 5000.00 |
| 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)

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

| | | |
|-----------|--|---|
| A. | Full Name (Last, First, Middle Initial) Dubois for Sheriff <hr/> Mailing Address PO BOX 232 <hr/> City OTISVILLE State NY Zip Code 10963 <hr/> Purpose of Disbursement Sponsorship Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5849 Date of Disbursement 07 / 05 / 2007 <hr/> Amount of Each Disbursement this Period 1200.00 |
| B. | Full Name (Last, First, Middle Initial) EFO Scott Rudder for Assembly <hr/> Mailing Address 223 High Street <hr/> City Mt. Holly State NJ Zip Code 08060 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5815 Date of Disbursement 09 / 20 / 2007 <hr/> Amount of Each Disbursement this Period 1000.00 |
| C. | Full Name (Last, First, Middle Initial) ELECTION FUND OF JOE KELLY <hr/> Mailing Address P.O. Box 70 <hr/> City Milmay State NJ Zip Code 08340 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5824 Date of Disbursement 10 / 11 / 2007 <hr/> Amount of Each Disbursement this Period 500.00 |

SUBTOTAL of Disbursements This Page (optional) ▶

2700.00

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)

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

| | |
|--|--|
| A. Full Name (Last, First, Middle Initial) Election Fund of Joe Pennacchio <hr/> Mailing Address PO Box 398 <hr/> City Cedar Knolls State NJ Zip Code 07927 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5817 Date of Disbursement 10 / 02 / 2007 |
| | Amount of Each Disbursement this Period 1400.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) ELECTION FUND OF PAUL A. SARLO <hr/> Mailing Address 9 Lincoln Avenue <hr/> City Rutherford State NJ Zip Code 07071 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5795 Date of Disbursement 07 / 27 / 2007 |
| | Amount of Each Disbursement this Period 5000.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) ELECTION FUND OF PAUL A. SARLO <hr/> Mailing Address 9 Lincoln Avenue <hr/> City Rutherford State NJ Zip Code 07071 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5810 Date of Disbursement 09 / 19 / 2007 |
| | Amount of Each Disbursement this Period 2000.00 |
| | Category/Type 011 |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

8400.00

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

| | | |
|----|--|---|
| A. | Full Name (Last, First, Middle Initial) ELECTION FUND OF PHIL HAINES | Transaction ID: SB29.5790 Date of Disbursement |
| | Mailing Address 223 HIGH STREET C/O CHARLES LAMBIASE, TREASURER | <input type="text" value="07"/> / <input type="text" value="23"/> / <input type="text" value="2007"/> |
| | City Mt. Holly State NJ Zip Code 08060 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Reception Candidate Name | <input type="text" value="1000.00"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="011"/> Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| B. | Full Name (Last, First, Middle Initial) ELECTION FUND OF PHIL HAINES | Transaction ID: SB29.5827 Date of Disbursement |
| | Mailing Address 223 HIGH STREET C/O CHARLES LAMBIASE, TREASURER | <input type="text" value="10"/> / <input type="text" value="17"/> / <input type="text" value="2007"/> |
| | City Mt. Holly State NJ Zip Code 08060 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Reception Candidate Name | <input type="text" value="1000.00"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="011"/> Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

| | | |
|----|--|---|
| C. | Full Name (Last, First, Middle Initial) Election Fund of Sean T. Kean | Transaction ID: SB29.5830 Date of Disbursement |
| | Mailing Address 1334 Laural Ave. Suite A | <input type="text" value="10"/> / <input type="text" value="24"/> / <input type="text" value="2007"/> |
| | City Wall State NJ Zip Code 08750 | Amount of Each Disbursement this Period |
| | Purpose of Disbursement Reception Candidate Name | <input type="text" value="3000.00"/> |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | <input type="text" value="011"/> Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | |

SUBTOTAL of Disbursements This Page (optional)

TOTAL This Period (last page this line number only)

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

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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)

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

| | |
|---|--|
| <p>A. Full Name (Last, First, Middle Initial) ELECTION FUND OF SENATOR CODEY</p> <p>Mailing Address 449 Mt. Pleasant Avenue Suite 102</p> <p>City West Orange State NJ Zip Code 07052</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5789</p> <p>Date of Disbursement 07 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 8200.00</p> <p>011 Category/Type</p> |
| <p>B. Full Name (Last, First, Middle Initial) Election Fund of Senator Robert Singer</p> <p>Mailing Address 3 North Dakota Court</p> <p>City Jackson State NJ Zip Code 08527</p> <p>Purpose of Disbursement Outing Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5797</p> <p>Date of Disbursement 08 / 03 / 2007</p> <p>Amount of Each Disbursement this Period 2620.00</p> <p>011 Category/Type</p> |
| <p>C. Full Name (Last, First, Middle Initial) ELECTION FUND OF THOMAS GIBLIN</p> <p>Mailing Address P.O. Box 43062</p> <p>City Upper Montclair State NJ Zip Code 07043</p> <p>Purpose of Disbursement Labor Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5839</p> <p>Date of Disbursement 11 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 2000.00</p> <p>011 Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

12820.00

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)

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

| | |
|--|--|
| <p>A. Full Name (Last, First, Middle Initial) EMPOWER NEWARK</p> <p>Mailing Address 188 JEFFERSON STREET</p> <p>City NEWARK State NJ Zip Code 07105</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5818 Date of Disbursement 10 / 02 / 2007</p> <p>Amount of Each Disbursement this Period 2200.00</p> <p>011 Category/Type</p> |
| <p>B. Full Name (Last, First, Middle Initial) FRIENDS OF ASSEMBLYMAN CLIFF CROUCH</p> <p>Mailing Address PO BOX 97</p> <p>City BAINBRIDGE State NY Zip Code 13733</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5876 Date of Disbursement 10 / 11 / 2007</p> <p>Amount of Each Disbursement this Period 250.00</p> <p>011 Category/Type</p> |
| <p>C. Full Name (Last, First, Middle Initial) FRIENDS OF CHRIS CERONE</p> <p>Mailing Address 41 Bingham Road</p> <p>City Marlboro State NY Zip Code 12542</p> <p>Purpose of Disbursement Reception Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:</p> <p>Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼</p> | <p>Transaction ID: SB29.5871 Date of Disbursement 09 / 20 / 2007</p> <p>Amount of Each Disbursement this Period 1000.00</p> <p>011 Category/Type</p> |

SUBTOTAL of Disbursements This Page (optional) ▶

3450.00

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)

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

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) FRIENDS OF CLIFF CROUCH Mailing Address P.O. Box 7334 City Albany State NY Zip Code 12224 Purpose of Disbursement Sponsor Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5859 Date of Disbursement 08 / 17 / 2007 |
| | Amount of Each Disbursement this Period 1000.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) FRIENDS OF DONALDSON & LOUGHRAN Mailing Address 101 Hoffman Street City Kingston State NY Zip Code 12401 Purpose of Disbursement Direct Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5890 Date of Disbursement 10 / 29 / 2007 |
| | Amount of Each Disbursement this Period 500.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) FRIENDS OF HECTOR RODRIGUEZ Mailing Address 69 Main Street City New Paltz State NY Zip Code 12561 Purpose of Disbursement Direct Contribution Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5886 Date of Disbursement 10 / 29 / 2007 |
| | Amount of Each Disbursement this Period 500.00 |
| | 011 Category/ Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

SUBTOTAL of Disbursements This Page (optional) ▶

2000.00

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

| | | | | | | | | | | | | | | | | | | | | | |
|--------|--|--|--------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF JUDGE GILPATRIC | Transaction ID: SB29.5868 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address P.O. Box 2637 | <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>9</td><td></td><td>1</td><td>3</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 1 | 3 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 1 | 3 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City Kingston State NY Zip Code 12402 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Reception Candidate Name | <table border="1"><tr><td>500.00</td></tr></table> | 500.00 | | | | | | | | | | | | | | | | | | |
| 500.00 | | | | | | | | | | | | | | | | | | | | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | |
| | | 011 Category/ Type | | | | | | | | | | | | | | | | | | | |

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|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| B. | Full Name (Last, First, Middle Initial) FRIENDS OF MELISSA BONACIC | Transaction ID: SB29.5861 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address P.O. BOX 816 | <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>9</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 9 | | 0 | 6 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 9 | | 0 | 6 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City PORT JERVIS State NY Zip Code 12771 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Direct Contribution Candidate Name | <table border="1"><tr><td>1000.00</td></tr></table> | 1000.00 | | | | | | | | | | | | | | | | | | |
| 1000.00 | | | | | | | | | | | | | | | | | | | | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | |
| | | 011 Category/ Type | | | | | | | | | | | | | | | | | | | |

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|---------|--|--|---------|---|---|---|---|---|---|---|---|---|---|---|--|---|---|--|---|---|---|
| C. | Full Name (Last, First, Middle Initial) FRIENDS OF NICK ASSELTA | Transaction ID: SB29.5785 Date of Disbursement | | | | | | | | | | | | | | | | | | | |
| | Mailing Address 1051 East Landis Avenue | <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>7</td><td></td><td>0</td><td>6</td><td></td><td>2</td><td>0</td><td>0</td><td>7</td></tr></table> | M | M | / | D | D | / | Y | Y | Y | Y | 0 | 7 | | 0 | 6 | | 2 | 0 | 0 |
| M | M | / | D | D | / | Y | Y | Y | Y | | | | | | | | | | | | |
| 0 | 7 | | 0 | 6 | | 2 | 0 | 0 | 7 | | | | | | | | | | | | |
| | City Vineland State NJ Zip Code 08360 | Amount of Each Disbursement this Period | | | | | | | | | | | | | | | | | | | |
| | Purpose of Disbursement Reception Candidate Name | <table border="1"><tr><td>1800.00</td></tr></table> | 1800.00 | | | | | | | | | | | | | | | | | | |
| 1800.00 | | | | | | | | | | | | | | | | | | | | | |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | | | | | | | | | | | | | | | | | | | |
| | | 011 Category/ Type | | | | | | | | | | | | | | | | | | | |

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|--|---|---------|
| SUBTOTAL of Disbursements This Page (optional) | <table border="1"><tr><td>3300.00</td></tr></table> | 3300.00 |
| 3300.00 | | |
| 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)

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

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NAME OF COMMITTEE (In Full)
INTERNATIONAL UNION OF OPERATING ENGINEERS LO 825 POLITICAL ACTION AND EDUCATION COMMITTEE

| | | |
|----|--|--|
| A. | Full Name (Last, First, Middle Initial) FRIENDS OF NICK ASSELTA | Transaction ID: SB29.5823 Date of Disbursement 10 / 11 / 2007 |
| | Mailing Address 1051 East Landis Avenue | Amount of Each Disbursement this Period 1000.00 |
| | City Vineland State NJ Zip Code 08360 | |
| | Purpose of Disbursement Reception Candidate Name | 011 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| B. | Full Name (Last, First, Middle Initial) FRIENDS OF NICK WOERNER | Transaction ID: SB29.5874 Date of Disbursement 10 / 01 / 2007 |
| | Mailing Address P.O. Box 1444 | Amount of Each Disbursement this Period 500.00 |
| | City Kingston State NY Zip Code 12402 | |
| | Purpose of Disbursement Reception Candidate Name | 011 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

| | | |
|----|--|--|
| C. | Full Name (Last, First, Middle Initial) FRIENDS OF SPEZIALE | Transaction ID: SB29.5796 Date of Disbursement 07 / 27 / 2007 |
| | Mailing Address 1146 Valley Road, Apt. 1A | Amount of Each Disbursement this Period 1180.00 |
| | City Wayne State NJ Zip Code 07470 | |
| | Purpose of Disbursement Outing Candidate Name | 011 Category/Type |
| | Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) | 2680.00 |
| TOTAL This Period (last page this line number only) | |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER: (check only one)

PAGE 40 / 45

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

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NAME OF COMMITTEE (In Full)

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

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Karcher for Senate <hr/> Mailing Address 86 Court Street <hr/> City Freehold State NJ Zip Code 07728 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5802 Date of Disbursement M M / D D / Y Y Y Y 0 8 / 0 7 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 5000.00 |
| | 011 Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| B. Full Name (Last, First, Middle Initial) MORRIS COUNTY DEMOCRATIC COMMITTEE <hr/> Mailing Address P.O. Box 306 <hr/> City Morristown State NJ Zip Code 07963 <hr/> Purpose of Disbursement Reception Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5838 Date of Disbursement M M / D D / Y Y Y Y 1 1 / 0 1 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 500.00 |
| | 011 Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |
| C. Full Name (Last, First, Middle Initial) MTDEC <hr/> Mailing Address C/O Howard W. Bruner, Chairman 124 Barnsboro Road <hr/> City Sewell State NJ Zip Code 08080 <hr/> Purpose of Disbursement Direct Contribution Candidate Name <hr/> Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5813 Date of Disbursement M M / D D / Y Y Y Y 0 9 / 2 0 / 2 0 0 7 |
| | Amount of Each Disbursement this Period 500.00 |
| | 011 Category/Type |
| | Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ |

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| SUBTOTAL of Disbursements This Page (optional) ▶ | 6000.00 |
| TOTAL This Period (last page this line number only) ▶ | (Empty box) |

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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

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NAME OF COMMITTEE (In Full)

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

A. Full Name (Last, First, Middle Initial)
NEW JERSEY STATE AFL-CIO C.O.P.E.

Mailing Address 106 West State Street

City State Zip Code
Trenton NJ 08608

Purpose of Disbursement
Direct Contribution

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5847

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
North Arlington Republican Club

Mailing Address P.O. Box 7366

City State Zip Code
North Arlington NJ 07031

Purpose of Disbursement
Direct Contribution

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5846

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
SAM THOMPSON FOR ASSEMBLY

Mailing Address 5 Lincroft Avenue

City State Zip Code
Old Bridge NJ 08857

Purpose of Disbursement
Reception

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2008
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.5808

Date of Disbursement

/ /

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional) ►

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

SCHEDULE B (FEC Form 3X) ITEMIZED DISBURSEMENTS

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

FOR LINE NUMBER:
(check only one)

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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)

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

A. Full Name (Last, First, Middle Initial)
Union County Democratic Committee

Mailing Address 65 King Street

City Hillside State NJ Zip Code 07205

Purpose of Disbursement Reception

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.5832

Date of Disbursement

10 / 31 / 2007

Amount of Each Disbursement this Period

2500.00

B. Full Name (Last, First, Middle Initial)
VERIZON COMMUNICATION INC GOOD GOV'T CLUB

Mailing Address 771 Parkway Ave
1717 ARCH ST. 47S

City Ewing State NJ Zip Code 08618

Purpose of Disbursement Reception

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.5787

Date of Disbursement

07 / 13 / 2007

Amount of Each Disbursement this Period

3000.00

C. Full Name (Last, First, Middle Initial)
WEST DEPTFORD DEMOCRATIC COMMITTEE

Mailing Address P.O. Box 355

City Thorofare State NJ Zip Code 08086

Purpose of Disbursement Reception

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2008 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.5812

Date of Disbursement

09 / 20 / 2007

Amount of Each Disbursement this Period

1600.00

SUBTOTAL of Disbursements This Page (optional)

7100.00

TOTAL This Period (last page this line number only)

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

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

FOR LINE NUMBER:
(check only one)

PAGE 45 / 45

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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)

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

| | |
|---|--|
| A. Full Name (Last, First, Middle Initial) Wilkins for Assembly Mailing Address 226 Morgan Avenue City Collingswood State NJ Zip Code 08108 Purpose of Disbursement Reception Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5806 Date of Disbursement 09 / 14 / 2007 |
| | Amount of Each Disbursement this Period 8200.00 Category/Type: 011 |
| B. Full Name (Last, First, Middle Initial) William Gervens for Mayor Mailing Address PO Box 95 City West Milford State NJ Zip Code 07480 Purpose of Disbursement Reception Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ | Transaction ID: SB29.5792 Date of Disbursement 07 / 24 / 2007 |
| | Amount of Each Disbursement this Period 1000.00 Category/Type: 011 |

SUBTOTAL of Disbursements This Page (optional) ▶

9200.00

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

130880.00