

# 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  
ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

ADDRESS (number and street) 32-32 48TH AVENUE  
 Check if different than previously reported. (ACC)  
LONG ISLAND CITY NY 11101

2. **FEC IDENTIFICATION NUMBER** C00386821  
**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 11 04 2008 in the State of NY  
(d) 30-Day **Post -Election** Report for the:  General (30G)  Runoff (30R)  Special (30S)  
Election on in the State of

5. Covering Period 10 01 2008 through 10 15 2008

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 JAMES P ELDER

Signature of Treasurer Electronically Filed by JAMES P ELDER Date 10 23 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

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

	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>8</td></tr></table>	Y	Y	Y	Y	2	0	0	8		688719.58
Y	Y	Y	Y							
2	0	0	8							
(b) Cash on Hand at Beginning of Reporting Period .....	704169.70									
(c) Total Receipts (from Line 19) .....	0.00	208826.55								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	704169.70	897546.13								
7. Total Disbursements (from Line 31) .....	14225.53	207601.96								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	689944.17	689944.17								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

Write or Type Committee Name

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period: From: 

M	M
1	0

D	D
0	1

Y	Y	Y	Y
2	0	0	8

 To: 

M	M
1	0

D	D
1	5

Y	Y	Y	Y
2	0	0	8

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) .....	0.00	205202.78
(ii) Unitemized .....	0.00	205202.78
(iii) TOTAL (add Lines 11(a)(i) and (ii) ▶	0.00	205202.78
(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) ▶	0.00	205202.78
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	3623.77
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5) .....	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees .....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.) .....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3) .....	0.00	0.00
(b) Levin Funds (from Schedule H5) .....	0.00	0.00
(c) Total 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)) .....	0.00	208826.55
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	0.00	208826.55

**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.....	2175.53	9941.19
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b)).....	2175.53	9941.19
22. Transfers to Affiliated/Other Party Committees.....	0.00	25000.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E) .....	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	3623.77
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.....	12050.00	169037.00
30. Federal Election Activity (2 U.S.C 431(20))		
(a) Shared Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share .....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	14225.53	207601.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14225.53	207601.96

**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 .....	0.00	205202.78
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	0.00	205202.78
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2175.53	9941.19
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2175.53	9941.19

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

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

FOR LINE NUMBER:  
(check only one)

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

Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee

NAME OF COMMITTEE (In Full)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN GALLAGHER	Transaction ID: SB21B.7482 Date of Disbursement
	Mailing Address 75 ROCKY POINT YAPHANK RD	<input type="text" value="10"/> / <input type="text" value="02"/> / <input type="text" value="2008"/>
	City State Zip Code ROCKY POINT NY 11778	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL AND OFFICE EXPENSE REIMBURSEMENTS	<input type="text" value="602.15"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
B.	Full Name (Last, First, Middle Initial) JOHN GALLAGHER	Transaction ID: SB21B.7483 Date of Disbursement
	Mailing Address 75 ROCKY POINT YAPHANK RD	<input type="text" value="10"/> / <input type="text" value="10"/> / <input type="text" value="2008"/>
	City State Zip Code ROCKY POINT NY 11778	Amount of Each Disbursement this Period
	Purpose of Disbursement TRAVEL AND OFFICE EXPENSE REIMBURSEMENTS	<input type="text" value="1573.38"/>
	Candidate Name	<input type="text" value="001"/> Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" 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 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
CAEZAR TRUNZO CAMPAIGN COMM

Transaction ID: SB29.7493

Date of Disbursement

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

Mailing Address 105 WASHINGTON AVE

Amount of Each Disbursement this Period

200.00
--------

City State Zip Code  
BRENTWOOD NY 11717

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011
-----

Category/  
Type

Candidate Name

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

State: District:

B.

Full Name (Last, First, Middle Initial)  
CUSICK FOR ASSEMBLY

Transaction ID: SB29.7487

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
1	0		0	7		2	0	0	8

Mailing Address 94 BENEDICT AVE

Amount of Each Disbursement this Period

450.00
--------

City State Zip Code  
STATEN ISLAND NY 10304

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011
-----

Category/  
Type

Candidate Name

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

State: District:

C.

Full Name (Last, First, Middle Initial)  
DEMOCRATIC COUNTY COMMITTEE

Transaction ID: SB29.7507

Date of Disbursement

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

Mailing Address 274 WATCHOGUE RD

Amount of Each Disbursement this Period

400.00
--------

City State Zip Code  
STATEN ISLAND NY 10314

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

011
-----

Category/  
Type

Candidate Name

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

State: District:

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

1050.00
---------

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

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

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

FOR LINE NUMBER:  
(check only one)

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) DINAPOLI 2010  Mailing Address 928 BROADWAY  City NEW YORK State NY Zip Code 10010  Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7486 Date of Disbursement 10 / 01 / 2008  Amount of Each Disbursement this Period 3500.00  011 Category/ Type
<b>B.</b>	Full Name (Last, First, Middle Initial) ELIZABETH CROWLEY FOR CITY COUNCIL  Mailing Address 420 LEXINGTON AVE  City NEW YORK State NY Zip Code 10170  Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7503 Date of Disbursement 10 / 15 / 2008  Amount of Each Disbursement this Period 300.00  011 Category/ Type
<b>C.</b>	Full Name (Last, First, Middle Initial) FRIENDS OF CATHERINE NOLAN  Mailing Address PO BOX 648698  City OAKLAND State NY Zip Code 11364  Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name  Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:  Disbursement For: 2008 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.7500 Date of Disbursement 10 / 15 / 2008  Amount of Each Disbursement this Period 500.00  011 Category/ Type

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

4300.00

**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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

**A.** Full Name (Last, First, Middle Initial)  
LAVINE FOR GOOD GOVERNMENT

Mailing Address PO BOX 23

City SEA CLIFF State NY Zip Code 11579

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

Category/  
Type

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

State: District:

Transaction ID: SB29.7489

Date of Disbursement

/

Amount of Each Disbursement this Period

**B.** Full Name (Last, First, Middle Initial)  
LIBERT DEMOCRATIC ASSOCIATION

Mailing Address 2187 CRUGER AVENEUE

City BRONX State NY Zip Code 10462

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

Category/  
Type

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

State: District:

Transaction ID: SB29.7494

Date of Disbursement

/

Amount of Each Disbursement this Period

**C.** Full Name (Last, First, Middle Initial)  
MCMAHON FOR CONGRESS

Mailing Address 66 ARNOLD ST

City STATEN ISLAND State NY Zip Code 10301

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

Category/  
Type

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

State: District:

Transaction ID: SB29.7488

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)

PAGE 11 / 12

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<b>A.</b>	Full Name (Last, First, Middle Initial) <b>MCMANUS DEMOCRATIC ASSOC</b>	<b>Transaction ID:</b> SB29.7491 Date of Disbursement 10 / 14 / 2008	
	Mailing Address <b>345 WEST 44TH ST</b>		
	City <b>NEW YORK</b> State <b>NY</b> Zip Code <b>10036</b>	Amount of Each Disbursement this Period	150.00
	Purpose of Disbursement <b>POLITICAL CONTRIBUTIONS</b>	<b>011</b>	Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	
<b>B.</b>	Full Name (Last, First, Middle Initial) <b>NASSAU COUNTY CONSERVATIVE COMM</b>	<b>Transaction ID:</b> SB29.7506 Date of Disbursement 10 / 15 / 2008	
	Mailing Address <b>30 PEERLESS DRIVE</b>		
	City <b>OYSTER BAY</b> State <b>NY</b> Zip Code <b>11771</b>	Amount of Each Disbursement this Period	1500.00
	Purpose of Disbursement <b>POLITICAL CONTRIBUTIONS</b>	<b>011</b>	Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	
<b>C.</b>	Full Name (Last, First, Middle Initial) <b>PEOPLE FOR PEREZ</b>	<b>Transaction ID:</b> SB29.7502 Date of Disbursement 10 / 15 / 2008	
	Mailing Address <b>PO BOX 580580 MT CARMEL STA</b>		
	City <b>BRONX</b> State <b>NY</b> Zip Code <b>10548</b>	Amount of Each Disbursement this Period	200.00
	Purpose of Disbursement <b>POLITICAL CONTRIBUTIONS</b>	<b>011</b>	Category/ Type
	Candidate Name		
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2008	
	State: District:	<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General	
		<input type="checkbox"/> Other (specify) ▼	

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

1850.00

**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 12 / 12

<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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)  
SUFFOLK COUNTY CONSERVATIVE CHAIRMANS COMM

Mailing Address PO BOX 100

City BAYPORT State NY Zip Code 11705

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

Transaction ID: SB29.7492

Date of Disbursement

10 / 15 / 2008

Amount of Each Disbursement this Period

1000.00

B.

Full Name (Last, First, Middle Initial)  
SUFFOLK COUNTY DEMOCRATIC COMMITTEE

Mailing Address 467 ROUTE 112

City PATCHOGUE State NY Zip Code 11772

Purpose of Disbursement  
POLITICAL CONTRIBUTIONS

Candidate Name

011  
Category/  
Type

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

Transaction ID: SB29.7485

Date of Disbursement

10 / 01 / 2008

Amount of Each Disbursement this Period

1200.00

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

2200.00

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

12050.00