

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 (12S)
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 04 01 2010 through 06 30 2010

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.
Type or Print Name of Treasurer JAMES P ELDER

Signature of Treasurer Electronically Filed by JAMES P ELDER Date 07 14 2010

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

Office Use Only									
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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
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

	COLUMN A This Period	COLUMN B Calendar Year-to-Date								
6. (a) Cash on Hand January 1 <table border="1"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	Y	Y	Y	Y	2	0	1	0		709779.35
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period	727024.25									
(c) Total Receipts (from Line 19)	45170.18	98782.18								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	772194.43	808561.53								
7. Total Disbursements (from Line 31)	79549.32	115916.42								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	692645.11	692645.11								
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

Write or Type Committee Name

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

Report Covering the Period: From:

M	M
0	4

D	D
0	1

Y	Y	Y	Y
2	0	1	0

 To:

M	M
0	6

D	D
3	0

Y	Y	Y	Y
2	0	1	0

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A)	0.00	0.00
(ii) Unitemized	45170.18	98782.18
(iii) TOTAL (add Lines 11(a)(i) and (ii)	45170.18	98782.18
(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)	45170.18	98782.18
12. Transfers From Affiliated/Other Party Committees	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5)	0.00	0.00
16. Refunds of Contributions Made to Federal candidates and Other Political Committees	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.)	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))	45170.18	98782.18
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	45170.18	98782.18

DETAILED SUMMARY PAGE

of Disbursements

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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.....	37195.32	50172.92
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	37195.32	50172.92
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	0.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00
29. Other Disbursements.....	42354.00	65743.50
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))..	79549.32	115916.42
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	79549.32	115916.42

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) from Line 11(d), page 3)	45170.18	98782.18
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	45170.18	98782.18
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	37195.32	50172.92
37. Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36)	37195.32	50172.92

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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
ACKERMAN FOR CONGRESS

Transaction ID: SB21B.8153
Date of Disbursement

Mailing Address PO BOX 95

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

City FRESH MEADOWS State NY Zip Code 11365

Amount of Each Disbursement this Period

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/ Type

2000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)
CLARKE FOR CONGRESS

Transaction ID: SB21B.8170
Date of Disbursement

Mailing Address 504 FLATBUSH AVENUE

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

City BROOKLYN State NY Zip Code 11225

Amount of Each Disbursement this Period

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/ Type

250.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
COMMITTEE TO ELECT GARY ACKERMAN

Transaction ID: SB21B.8171
Date of Disbursement

Mailing Address PO BOX 15616
SOUTHEAST STA

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	8		2	0	1	0

City WASHINGTON State DC Zip Code 20003

Amount of Each Disbursement this Period

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/ Type

1000.00

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

3250.00

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 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)
CROWLEY FOR CONGRESS

Transaction ID: SB21B.8179
Date of Disbursement

Mailing Address PO BOX 75214

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

City State Zip Code
WASHINGTON DC 20013

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: NY District: 12

B.

Full Name (Last, First, Middle Initial)
FRIENDS OF MARTIN OMALLEY

Transaction ID: SB21B.8208
Date of Disbursement

Mailing Address PO BOX 38380

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

City State Zip Code
BALTIMORE MD 21231

Amount of Each Disbursement this Period

3000.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

C.

Full Name (Last, First, Middle Initial)
JOHN GALLAGHER

Transaction ID: SB21B.8225
Date of Disbursement

Mailing Address 75 ROCKY POINT YAPHANK RD

M	M	/	D	D	/	Y	Y	Y	Y
0	4		0	7		2	0	1	0

City State Zip Code
ROCKY POINT NY 11778

Amount of Each Disbursement this Period

1847.00

Purpose of Disbursement
ADMINISTRATIVE EXPENSES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional) ►

5097.00

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 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)
ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

<p>A.</p> <p>Full Name (Last, First, Middle Initial) JOHN GALLAGHER</p> <p>Mailing Address 75 ROCKY POINT YAPHANK RD</p> <p>City ROCKY POINT State NY Zip Code 11778</p> <p>Purpose of Disbursement REIMBURSEMENT FOR MILEAGE(2,257 X 58.5)</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8225.0</p> <p>Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 1320.35</p> <p>002 Category/ Type</p> <p>[MEMO ITEM]</p>
<p>B.</p> <p>Full Name (Last, First, Middle Initial) AT & T MOBILITY</p> <p>Mailing Address PO BOX 537118</p> <p>City ATLANTA State GA Zip Code 30353</p> <p>Purpose of Disbursement TELEPHONE EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8225.1</p> <p>Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 65.01</p> <p>001 Category/ Type</p> <p>[MEMO ITEM]</p>
<p>C.</p> <p>Full Name (Last, First, Middle Initial) VERIZON</p> <p>Mailing Address PO BOX 100</p> <p>City ALBANY State NY Zip Code 12250</p> <p>Purpose of Disbursement TELEPHONE EXPENSE REIMBURSEMENT</p> <p>Candidate Name</p> <p>Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President</p> <p>State: District:</p>	<p>Transaction ID: SB21B.8225.2</p> <p>Date of Disbursement 04 / 07 / 2010</p> <p>Amount of Each Disbursement this Period 92.53</p> <p>001 Category/ Type</p> <p>[MEMO ITEM]</p>

SUBTOTAL of Disbursements This Page (optional)	0.00
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)
ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) CROWNE PLAZA Mailing Address STATE AND LODGE STREETS City ALBANY State NY Zip Code 12207 Purpose of Disbursement HOTEL CHARGE REIMBURSEMENT Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8225.3 Date of Disbursement 04 / 07 / 2010	Amount of Each Disbursement this Period 226.86 [MEMO ITEM]
B.	Full Name (Last, First, Middle Initial) JOHN GALLAGHER Mailing Address 75 ROCKY POINT YAPHANK RD City ROCKY POINT State NY Zip Code 11778 Purpose of Disbursement MONTHLY RETAINER POLITICAL ACTIVITIES COORDINATOR Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8226 Date of Disbursement 04 / 07 / 2010	Amount of Each Disbursement this Period 4931.20
C.	Full Name (Last, First, Middle Initial) JOHN GALLAGHER Mailing Address 75 ROCKY POINT YAPHANK RD City ROCKY POINT State NY Zip Code 11778 Purpose of Disbursement ADMINISTRATIVE EXPENSES Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB21B.8227 Date of Disbursement 05 / 12 / 2010	Amount of Each Disbursement this Period 1893.03

SUBTOTAL of Disbursements This Page (optional) ▶

6824.23

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 10 / 32

<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)
ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.	Full Name (Last, First, Middle Initial) JOHN GALLAGHER	Transaction ID: SB21B.8227.0 Date of Disbursement 05 / 12 / 2010
	Mailing Address 75 ROCKY POINT YAPHANK RD	Amount of Each Disbursement this Period 960.57
	City ROCKY POINT State NY Zip Code 11778	
	Purpose of Disbursement MILEAGE REIMBURSEMENT (1,642 X 58.5) Candidate Name	002 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

B.	Full Name (Last, First, Middle Initial) AT & T MOBILITY	Transaction ID: SB21B.8227.1 Date of Disbursement 05 / 12 / 2010
	Mailing Address PO BOX 537118	Amount of Each Disbursement this Period 65.20
	City ATLANTA State GA Zip Code 30353	
	Purpose of Disbursement TELEPHONE EXPENSE REIMBURSEMENT Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

C.	Full Name (Last, First, Middle Initial) VERIZON	Transaction ID: SB21B.8227.2 Date of Disbursement 05 / 12 / 2010
	Mailing Address PO BOX 100	Amount of Each Disbursement this Period 85.74
	City ALBANY State NY Zip Code 12250	
	Purpose of Disbursement TELEPHONE EXPENSE REIMBURSEMENT Candidate Name	001 Category/ Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
		[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional)	0.00
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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

CROWNE PLAZA

Mailing Address STATE AND LODGE STREETS

City ALBANY State NY Zip Code 12207

Purpose of Disbursement HOTEL CHARGE REIMBURSEMENT CONFERENCE 4/16-18/2010

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.8227.4

Date of Disbursement

05 / 12 / 2010

Amount of Each Disbursement this Period

305.52

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

SOMOS EL FUTURO INC.

Mailing Address P.O. BOX 2048 ESP STATION

City ALBANY State NY Zip Code 12220

Purpose of Disbursement CONFERENCE EXPENSE REIMBURSEMENT

Candidate Name

011
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.8227.5

Date of Disbursement

05 / 12 / 2010

Amount of Each Disbursement this Period

350.00

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

CROWNE PLAZA

Mailing Address STATE AND LODGE STREETS

City ALBANY State NY Zip Code 12207

Purpose of Disbursement PARKING CHARGES

Candidate Name

002
Category/
Type

Office Sought: House Senate President

Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB21B.8227.7

Date of Disbursement

05 / 12 / 2010

Amount of Each Disbursement this Period

14.00

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

0.00

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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Transaction ID: SB21B.8228

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Mailing Address 75 ROCKY POINT YAPHANK RD

Amount of Each Disbursement this Period

1024.09

City State Zip Code
ROCKY POINT NY 11778

Purpose of Disbursement
ADMINISTRATIVE EXPENSES

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

B.

Full Name (Last, First, Middle Initial)

JOHN GALLAGHER

Transaction ID: SB21B.8228.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Mailing Address 75 ROCKY POINT YAPHANK RD

Amount of Each Disbursement this Period

780.98

City State Zip Code
ROCKY POINT NY 11778

Purpose of Disbursement
MILEAGE REIMBURSEMENT (1,335 X 58.5)

002

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

C.

Full Name (Last, First, Middle Initial)

AT & T MOBILITY

Transaction ID: SB21B.8228.1

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	6		0	9		2	0	1	0

Mailing Address PO BOX 537118

Amount of Each Disbursement this Period

65.24

City State Zip Code
ATLANTA GA 30353

Purpose of Disbursement
TELEPHONE EXPENSE REIMBURSEMENT

001

Category/
Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional) ▶

1024.09

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 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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A.

Full Name (Last, First, Middle Initial)

VERIZON

Mailing Address PO BOX 100

City ALBANY State NY Zip Code 12250

Purpose of Disbursement
TELEPHONE EXPENSE REIMBURSEMENT

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8228.2

Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

85.62

[MEMO ITEM]

B.

Full Name (Last, First, Middle Initial)

MULLIGAN & GROTE CPA PC

Mailing Address 131 TULIP AVE

City FLORAL PARK State NY Zip Code 11001

Purpose of Disbursement
ACCOUNTING SERVICES

Candidate Name

001
Category/
Type

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB21B.8241

Date of Disbursement

05 / 05 / 2010

Amount of Each Disbursement this Period

21000.00

SUBTOTAL of Disbursements This Page (optional)

21000.00

TOTAL This Period (last page this line number only)

37195.32

**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) ANDREW CUOMO 2010 Mailing Address PO BOX 683 City NEW YORK State NY Zip Code 10008 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8156 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 0	Amount of Each Disbursement this Period 1000.00
B.	Full Name (Last, First, Middle Initial) ANTHONY R GAETA DEMOCRATIC CLUB OF STATEN ISLAND Mailing Address 40 HOLDEN BLVD City STATEN ISLAND State NY Zip Code 10314 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8157 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 1 7 / 2 0 1 0	Amount of Each Disbursement this Period 510.00
C.	Full Name (Last, First, Middle Initial) BRONX CONSERVATIVE PARTY Mailing Address 943 MORRIS PARK AVE City BRONX State NY Zip Code 10462 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Transaction ID: SB29.8159 Date of Disbursement M M / D D / Y Y Y Y 0 4 / 0 7 / 2 0 1 0	Amount of Each Disbursement this Period 800.00

SUBTOTAL of Disbursements This Page (optional) ▶

2310.00

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)
BROOK-KRASNY FOR ASSEMBLY

Mailing Address 4121 18TH AVE

City BROOKLYN State NY Zip Code 11218

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8160

Date of Disbursement

06 / 17 / 2010

Amount of Each Disbursement this Period

250.00

B. Full Name (Last, First, Middle Initial)
BROOKHAVEN TOWN DEMOCRATIC COMM

Mailing Address PO BOX 648

City MORCHES State NY Zip Code 11955

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8161

Date of Disbursement

05 / 21 / 2010

Amount of Each Disbursement this Period

300.00

C. Full Name (Last, First, Middle Initial)
BUILDING AND CONSTRUCTION TRADE COUNCIL

Mailing Address 71 WEST 23RD STREET

City NEW YORK State NY Zip Code 10011

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8162

Date of Disbursement

05 / 12 / 2010

Amount of Each Disbursement this Period

1675.00

SUBTOTAL of Disbursements This Page (optional) ▶

2225.00

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. CAMPAIGN FOR A DEMOCRATIC LEGISLATURE

Full Name (Last, First, Middle Initial)

CAMPAIGN FOR A DEMOCRATIC LEGISLATURE

Mailing Address PO BOX 163

City HOLBROOK State NY Zip Code 11471

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8163

Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

1300.00

B. CARMEN E ARROYO FOR ASSEMBLY

Full Name (Last, First, Middle Initial)

CARMEN E ARROYO FOR ASSEMBLY

Mailing Address 402 EAST 155TH ST

City BRONX State NY Zip Code 10455

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8164

Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

250.00

C. CHIPPEWA DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

CHIPPEWA DEMOCRATIC CLUB

Mailing Address 1447 FERRIS PLACE

City BRONX State NY Zip Code 10461

Purpose of Disbursement POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8167

Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional) ►

2050.00

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) CITIZENS FOR DILON	Transaction ID: SB29.8168 Date of Disbursement
	Mailing Address P.O. BOX 370-551	<input type="text" value="06"/> / <input type="text" value="09"/> / <input type="text" value="2010"/>
	City: BROOKLYN State: NY Zip Code: 11237	Amount of Each Disbursement this Period
	Purpose of Disbursement: POLITICAL CONTRIBUTION	<input type="text" value="250.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

B.	Full Name (Last, First, Middle Initial) CUSICK FOR ASSEMBLY	Transaction ID: SB29.8181 Date of Disbursement
	Mailing Address 94 BENEDICT AVE	<input type="text" value="06"/> / <input type="text" value="01"/> / <input type="text" value="2010"/>
	City: STATEN ISLAND State: NY Zip Code: 10304	Amount of Each Disbursement this Period
	Purpose of Disbursement: POLITICAL CONTRIBUTION	<input type="text" value="450.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

C.	Full Name (Last, First, Middle Initial) DEMOCRATIC ORG OF QUEENS	Transaction ID: SB29.8182 Date of Disbursement
	Mailing Address 72-50 AUSTIN ST	<input type="text" value="05"/> / <input type="text" value="12"/> / <input type="text" value="2010"/>
	City: FOREST HILLS State: NY Zip Code: 11375	Amount of Each Disbursement this Period
	Purpose of Disbursement: POLITICAL CONTRIBUTION	<input type="text" value="600.00"/>
	Candidate Name	<input type="text" value="011"/> Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:	

SUBTOTAL of Disbursements This Page (optional)	<input type="text" value="1300.00"/>
TOTAL This Period (last page this line number only)	<input type="text"/>

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

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

FOR LINE NUMBER:
(check only one)

PAGE 18 / 32

<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) DINAPOLI 2010 Mailing Address 928 BROADWAY City NEW YORK State NY Zip Code 10010 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8183 Date of Disbursement 05 / 19 / 2010 Amount of Each Disbursement this Period 2500.00 011 Category/ Type	
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 CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8184 Date of Disbursement 06 / 03 / 2010 Amount of Each Disbursement this Period 500.00 011 Category/ Type	
C.	Full Name (Last, First, Middle Initial) FOLEY FOR SENATE Mailing Address PO BOX 214 City FARMINGVILLE State NY Zip Code 11728 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8185 Date of Disbursement 04 / 07 / 2010 Amount of Each Disbursement this Period 500.00 011 Category/ Type	

SUBTOTAL of Disbursements This Page (optional) ▶

3500.00

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. FRIENDS OF ASSEMBLYMAN JEFFREY DINOWITZ

Full Name (Last, First, Middle Initial)

Mailing Address 3050 FAIRFIELD AVE

City BRONX State NY Zip Code 10463

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8189

Date of Disbursement

05 / 21 / 2010

Amount of Each Disbursement this Period

250.00

B. FRIENDS OF CHRIS NUZZI

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 635

City SPEONK State NY Zip Code 11972

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8192

Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

250.00

C. FRIENDS OF DAN LOSQUADRO

Full Name (Last, First, Middle Initial)

Mailing Address PO BOX 397

City SHOREHAM State NY Zip Code 11786

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8193

Date of Disbursement

04 / 07 / 2010

Amount of Each Disbursement this Period

400.00

SUBTOTAL of Disbursements This Page (optional) ▶

900.00

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) FRIENDS OF DAVID DENENBERG	Transaction ID: SB29.8194 Date of Disbursement																			
	Mailing Address 2818 MERRICK RD	<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>4</td><td>/</td><td>0</td><td>7</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4	/	0	7	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	4	/	0	7	/	2	0	1	0												
	City BELLMORE State NY Zip Code 10710	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<table border="1"><tr><td>450.00</td></tr></table>	450.00																		
450.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

B.	Full Name (Last, First, Middle Initial) FRIENDS OF DAVID WEPRIN	Transaction ID: SB29.8195 Date of Disbursement																			
	Mailing Address PO BOX 66-0101 UTOPIA STATION	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>0</td><td>5</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	0	5	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	0	5	/	2	0	1	0												
	City FLUSHING State NY Zip Code 11366	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION 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 Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

C.	Full Name (Last, First, Middle Initial) FRIENDS OF EVETTE ZAYAS	Transaction ID: SB29.8197 Date of Disbursement																			
	Mailing Address 230 EAST 123RD ST	<table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td>/</td><td>2</td><td>1</td><td>/</td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5	/	2	1	/	2	0	1
M	M	/	D	D	/	Y	Y	Y	Y												
0	5	/	2	1	/	2	0	1	0												
	City NEW YORK State NY Zip Code 10035	Amount of Each Disbursement this Period																			
	Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name	<table border="1"><tr><td>250.00</td></tr></table>	250.00																		
250.00																					
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																				
	State: District:																				

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>1200.00</td></tr></table>	1200.00
1200.00		
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)

PAGE 21 / 32

<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) FRIENDS OF HYER SPENCER			Transaction ID: SB29.8186																				
	Mailing Address PO BOX 80112			Date of Disbursement <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>4</td><td></td><td>0</td><td>7</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	4		0	7		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	4		0	7		2	0	1	0														
City STATEN ISLAND		State NY	Zip Code 10308	Amount of Each Disbursement this Period <table border="1"><tr><td>3</td><td>8</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	3	8	0	0	0	0														
3	8	0	0	0	0																			
Purpose of Disbursement POLITICAL CONTRIBUTION			<table border="1"><tr><td>0</td><td>1</td></tr></table> Category/ Type	0	1																			
0	1																							
Candidate Name																								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																								
B.	Full Name (Last, First, Middle Initial) FRIENDS OF KAREN KOSLOWITZ			Transaction ID: SB29.8200																				
	Mailing Address 6940 108TH ST			Date of Disbursement <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>6</td><td></td><td>0</td><td>3</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	6		0	3		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	6		0	3		2	0	1	0														
City FOREST HILLS		State NY	Zip Code 11375	Amount of Each Disbursement this Period <table border="1"><tr><td>2</td><td>5</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	2	5	0	0	0	0														
2	5	0	0	0	0																			
Purpose of Disbursement POLITICAL CONTRIBUTION			<table border="1"><tr><td>0</td><td>1</td></tr></table> Category/ Type	0	1																			
0	1																							
Candidate Name																								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																								
C.	Full Name (Last, First, Middle Initial) FRIENDS OF KATHLEEN WALSH			Transaction ID: SB29.8202																				
	Mailing Address PO BOX 1427			Date of Disbursement <table border="1"><tr><td>M</td><td>M</td><td>/</td><td>D</td><td>D</td><td>/</td><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>0</td><td>5</td><td></td><td>0</td><td>5</td><td></td><td>2</td><td>0</td><td>1</td><td>0</td></tr></table>	M	M	/	D	D	/	Y	Y	Y	Y	0	5		0	5		2	0	1	0
	M	M	/	D	D	/	Y	Y	Y	Y														
	0	5		0	5		2	0	1	0														
City SELDEN		State NY	Zip Code 11784	Amount of Each Disbursement this Period <table border="1"><tr><td>1</td><td>7</td><td>0</td><td>0</td><td>0</td><td>0</td></tr></table>	1	7	0	0	0	0														
1	7	0	0	0	0																			
Purpose of Disbursement POLITICAL CONTRIBUTION			<table border="1"><tr><td>0</td><td>1</td></tr></table> Category/ Type	0	1																			
0	1																							
Candidate Name																								
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼																						
State: District:																								

SUBTOTAL of Disbursements This Page (optional)	<table border="1"><tr><td>4</td><td>2</td><td>2</td><td>0</td><td>0</td><td>0</td></tr></table>	4	2	2	0	0	0
4	2	2	0	0	0		
TOTAL This Period (last page this line number only)	<table border="1"><tr><td> </td><td> </td><td> </td><td> </td><td> </td><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)

ENTERPRISE ASSOCIATION OF STEAMFITTERS LOCAL 638 POLITICAL ACTION COMMITTEE

A. Full Name (Last, First, Middle Initial)
FRIENDS OF LYNDA C. NOWICKI

Mailing Address PO BOX 481

City ST. JAMES State NY Zip Code 11780

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8203

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
FRIENDS OF MARK ALESSI

Mailing Address PO BOX 233

City WADING RIVER State NY Zip Code 11792

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8204

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
FRIENDS OF MARTY GOLDEN

Mailing Address 9306 4TH AVE

City BROOKLYN State NY Zip Code 11209

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8209

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)

<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) FRIENDS OF RICK MONTANO Mailing Address 56 PROSPECT DRIVE City BRENTWOOD State NY Zip Code 11717 Purpose of Disbursement POLITICAL CONTRIBUTIONS Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8212 Date of Disbursement M M / D D / Y Y Y Y 06 / 28 / 2010	Amount of Each Disbursement this Period 300.00
B.	Full Name (Last, First, Middle Initial) FRIENDS OF STEVE FIORE-ROSENFELD Mailing Address PO BOX 408 City EAST SETAUKET State NY Zip Code 11733 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8215 Date of Disbursement M M / D D / Y Y Y Y 04 / 26 / 2010	Amount of Each Disbursement this Period 300.00
C.	Full Name (Last, First, Middle Initial) FRIENDS OF STEVE LEVY Mailing Address PO BOX 980 City BAYPORT State NY Zip Code 11705 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8217 Date of Disbursement M M / D D / Y Y Y Y 04 / 13 / 2010	Amount of Each Disbursement this Period 2500.00

SUBTOTAL of Disbursements This Page (optional) ▶

3100.00

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 24 / 32

<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) JIM GENNARO FOR NEW YORK Mailing Address PO BOX 660012 City FRESH MEADOWS State NY Zip Code 11365 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB29.8221 Date of Disbursement M M / D D / Y Y Y Y 05 / 05 / 2010	Amount of Each Disbursement this Period 600.00
B.	Full Name (Last, First, Middle Initial) KATHLEEN RICE 2010 Mailing Address 29 SERPENTINE LAN City OLD BETHPAGE State NY Zip Code 11804 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB29.8230 Date of Disbursement M M / D D / Y Y Y Y 05 / 12 / 2010	Amount of Each Disbursement this Period 500.00
C.	Full Name (Last, First, Middle Initial) LIBERTY DEMOCRATIC ASSOCIATION Mailing Address 2187 CRUGER AVENEUE City BRONX State NY Zip Code 10462 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name _____ Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: _____ District: _____	Transaction ID: SB29.8234 Date of Disbursement M M / D D / Y Y Y Y 06 / 09 / 2010	Amount of Each Disbursement this Period 400.00

SUBTOTAL of Disbursements This Page (optional)	1500.00
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) LIBERTY DEMOCRATIC ASSOCIATION	Transaction ID: SB29.8235 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 1 0	
	Mailing Address 2187 CRUGER AVENEUE		Amount of Each Disbursement this Period 400.00
	City BRONX State NY Zip Code 10462		
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		
B.	Full Name (Last, First, Middle Initial) MALONEY FOR CONGRESS	Transaction ID: SB29.8236 Date of Disbursement M M / D D / Y Y Y Y 0 5 / 2 0 / 2 0 1 0	
	Mailing Address 49 EAST 92ND STREET		Amount of Each Disbursement this Period 500.00
	City NEW YORK State NY Zip Code 10128		
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	
	Candidate Name	Category/Type	
	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: NY District: 14		
C.	Full Name (Last, First, Middle Initial) MASSAPEQUA REPUBLICAN COMMITTEE	Transaction ID: SB29.8237 Date of Disbursement M M / D D / Y Y Y Y 0 6 / 0 9 / 2 0 1 0	
	Mailing Address 29 BROCK MEYERE DRIVE		Amount of Each Disbursement this Period 720.00
	City MASSAPEQUA State NY Zip Code 11758		
	Purpose of Disbursement POLITICAL CONTRIBUTION	<input type="checkbox"/> 011	
	Candidate Name	Category/Type	
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
	State: District:		

SUBTOTAL of Disbursements This Page (optional) ▶

1620.00

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) MCMANUS 2010 Mailing Address 2822 CODDINGTON AVENUE City BRONX State NY Zip Code 10461 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8238 Date of Disbursement 06 / 09 / 2010	Amount of Each Disbursement this Period 2000.00
B.	Full Name (Last, First, Middle Initial) MCMANUS DEMOCRATIC ASSOC Mailing Address 345 WEST 44TH ST City NEW YORK State NY Zip Code 10036 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	Transaction ID: SB29.8239 Date of Disbursement 05 / 03 / 2010	Amount of Each Disbursement this Period 400.00
C.	Full Name (Last, First, Middle Initial) NADLER, JERROLD L. MR. Mailing Address 315 West 70th Street Apartment #3C City New York State NY Zip Code 10023 Purpose of Disbursement POLITICAL CONTRIBUTION Candidate Name Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2010 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: NY District: 08	Transaction ID: SB29.8176 Date of Disbursement 05 / 24 / 2010	Amount of Each Disbursement this Period 5000.00

SUBTOTAL of Disbursements This Page (optional) ▶

7400.00

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)
NASSAU COUNTY CONSERVATIVE COMM

Mailing Address 30 PEERLESS DRIVE

City OYSTER BAY State NY Zip Code 11771

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8242

Date of Disbursement

04 / 21 / 2010

Amount of Each Disbursement this Period

500.00

B. Full Name (Last, First, Middle Initial)
NASSAU COUNTY REPUBLICAN COMMITTEE

Mailing Address 164 POST AVE

City WESTBURY State NY Zip Code 11590

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8243

Date of Disbursement

04 / 26 / 2010

Amount of Each Disbursement this Period

350.00

C. Full Name (Last, First, Middle Initial)
NORTH SHORE DEMOCRATIC CLUB

Mailing Address 72 CROSSHELL ST

City STATEN ISLAND State NY Zip Code 10301

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

Transaction ID: SB29.8244

Date of Disbursement

04 / 07 / 2010

Amount of Each Disbursement this Period

340.00

SUBTOTAL of Disbursements This Page (optional) ►

1190.00

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)
PATRICIA EDDINGTON FOR TOWN CLERK

Mailing Address PO BOX 49

City MEDFORD State NY Zip Code 11763

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8245

Date of Disbursement

/

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
PEOPLE FOR DIAZ

Mailing Address 840 GRAND CONCOURSE

City BRONX State NY Zip Code 10451

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8246

Date of Disbursement

/

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
RIENDS OF MIKE MILLER FOR STATE ASSEMBLY

Mailing Address 150 WERST 51ST ST

City NEW YORK State NY Zip Code 10023

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

Category/
Type

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

Transaction ID: SB29.8210

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 29 / 32

<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)
SAWICKI FOR COMPTROLLERS

Mailing Address PO BOX 763

City State Zip Code
CUTCHOGUE NY 11935

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.8248
Date of Disbursement

05 / 21 / 2010

Amount of Each Disbursement this Period

375.00

B.

Full Name (Last, First, Middle Initial)
SCHNEIDERMAN FOR ATTORNEY GENERAL

Mailing Address 131 VARICK ST

City State Zip Code
NEW YORK NY 10013

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.8249
Date of Disbursement

06 / 09 / 2010

Amount of Each Disbursement this Period

500.00

C.

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

Mailing Address 467 ROUTE 112

City State Zip Code
PATCHOGUE NY 11772

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

011
Category/
Type

Office Sought: House Senate President
Disbursement For: 2010
 Primary General
 Other (specify) ▼
State: District:

Transaction ID: SB29.8253
Date of Disbursement

04 / 07 / 2010

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional) ▶

1125.00

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. SUFFOLK COUNTY REPUBLICAN COMMITTEE

Full Name (Last, First, Middle Initial)

SUFFOLK COUNTY REPUBLICAN COMMITTEE

Transaction ID: SB29.8255

Date of Disbursement

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

Mailing Address 3340 VETERANS MEMORIAL HIGHWAY

Amount of Each Disbursement this Period

500.00

City BOHEMIA State NY Zip Code 11716

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

B. THE LEXINGTON DEMOCRATIC CLUB

Full Name (Last, First, Middle Initial)

THE LEXINGTON DEMOCRATIC CLUB

Transaction ID: SB29.8256

Date of Disbursement

^M 0	^M 4	/	^D 0	^D 7	/	^Y 2	^Y 0	^Y 1	^Y 0
----------------	----------------	---	----------------	----------------	---	----------------	----------------	----------------	----------------

Mailing Address 1202 LEXINGTON AVE

Amount of Each Disbursement this Period

425.00

City NEW YORK State NY Zip Code 10028

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: District:

C. TIM BISHOP FOR CONGRESS

Full Name (Last, First, Middle Initial)

TIM BISHOP FOR CONGRESS

Transaction ID: SB29.8258

Date of Disbursement

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

Mailing Address PO Box 437

Amount of Each Disbursement this Period

375.00

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
POLITICAL CONTRIBUTION

011

Category/
Type

Candidate Name

Office Sought: House Senate President
Disbursement For: 2010 Primary General Other (specify) ▼

State: NY District: 01

SUBTOTAL of Disbursements This Page (optional) ▶

1300.00

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

A. Full Name (Last, First, Middle Initial)
TIM BISHOP FOR CONGRESS

Mailing Address PO Box 437

City Farmingville State NY Zip Code 11738

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

010
 011
Category/
Type

Office Sought: House
 Senate
 President
State: NY District: 01

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB29.8259

Date of Disbursement

/ /

Amount of Each Disbursement this Period

B. Full Name (Last, First, Middle Initial)
TOM SPODA FOR DISTRICT ATTORNEY

Mailing Address PO BOX 883

City BABYLON State NY Zip Code 11702

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

010
 011
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB29.8260

Date of Disbursement

/ /

Amount of Each Disbursement this Period

C. Full Name (Last, First, Middle Initial)
ULRICH FOR NEW YORK

Mailing Address 101-17 84TH AVE

City SOUTH OZONE PK State NY Zip Code 11416

Purpose of Disbursement
POLITICAL CONTRIBUTION

Candidate Name

010
 011
Category/
Type

Office Sought: House
 Senate
 President
State: District:

Disbursement For: 2010
 Primary General
 Other (specify) ▼

Transaction ID: SB29.8261

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 32 / 32

<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)

VALLONE FOR NEW YORK

Transaction ID: SB29.8263

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	5		1	3		2	0	1	0

Mailing Address 123 WILLIAM ST
22ND FLOOR

City NEW YORK State NY Zip Code 10028

Amount of Each Disbursement this Period

250.00

Purpose of Disbursement
POLITICAL CONTRIBUTION

011
Category/ Type

Candidate Name

Office Sought: House
 Senate
 President

Disbursement For: 2010
 Primary General
 Other (specify) ▼

State: District:

SUBTOTAL of Disbursements This Page (optional)

250.00

TOTAL This Period (last page this line number only)

40360.00
