

# 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  
Local 399, International Union of Operating Engineers Federal PAC

ADDRESS (number and street) 763 West Jackson Blvd.  
 Check if different than previously reported. (ACC)  
Chicago IL 60661

2. **FEC IDENTIFICATION NUMBER** C00432815  
**3. IS THIS REPORT**  NEW (N) **OR**  AMENDED (A)

4. **TYPE OF REPORT** (Choose One)  
(a) Quarterly Reports:  
 April 15 Quarterly Report(Q1)  
 July 15 Quarterly Report(Q2)  
 October 15 Quarterly Report(Q3)  
 January 31 Quarterly Report(YE)  
 July 31 Mid-Year Report(Non-election Year Only) (MY)  
 Termination Report (TER)  
(b) Monthly Report Due On:  
 Feb 20 (M2)  May 20 (M5)  Aug 20 (M8)  Nov 20 (M11) (Non-Election Year Only)  
 Mar 20 (M3)  Jun 20 (M6)  Sep 20 (M9)  Dec 20 (M12) (Non-Election Year Only)  
 Apr 20 (M4)  Jul 20 (M7)  Oct 20 (M10)  Jan 31 (YE)  
(c) 12-Day **PRE**-Election Report for the:  
 Primary (12P)  General (12G)  Runoff (12R)  
 Convention (12C)  Special (12G)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_  
(d) 30-Day **Post**-Election Report for the:  
 General (30G)  Runoff (30R)  Special (30S)  
Election on \_\_\_\_\_ in the State of \_\_\_\_\_

5. Covering Period 07 01 2007 through 12 31 2007

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer William Neil Masterson

Signature of Treasurer Electronically Filed by William Neil Masterson Date 01 30 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								
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**FEC FORM 3X**  
(Rev. 12/2004)

**SUMMARY PAGE  
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name  
Local 399, International Union of Operating Engineers Federal PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

	COLUMN A This Period	COLUMN B Calendar Year-to-Date										
6. (a) Cash on Hand January 1 <table border="1" style="display: inline-table; border-collapse: collapse;"><tr><td>Y</td><td>Y</td><td>Y</td><td>Y</td></tr><tr><td>2</td><td>0</td><td>0</td><td>7</td></tr></table>	Y	Y	Y	Y	2	0	0	7	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00
Y	Y	Y	Y									
2	0	0	7									
0.00												
0.00												
(b) Cash on Hand at Beginning of Reporting Period .....	<table border="1" style="width: 100%;"><tr><td>98216.96</td></tr></table>	98216.96										
98216.96												
(c) Total Receipts (from Line 19) .....	<table border="1" style="width: 100%;"><tr><td>21610.00</td></tr></table>	21610.00	<table border="1" style="width: 100%;"><tr><td>146315.00</td></tr></table>	146315.00								
21610.00												
146315.00												
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	<table border="1" style="width: 100%;"><tr><td>119826.96</td></tr></table>	119826.96	<table border="1" style="width: 100%;"><tr><td>146315.00</td></tr></table>	146315.00								
119826.96												
146315.00												
7. Total Disbursements (from Line 31) .....	<table border="1" style="width: 100%;"><tr><td>107958.04</td></tr></table>	107958.04	<table border="1" style="width: 100%;"><tr><td>134446.08</td></tr></table>	134446.08								
107958.04												
134446.08												
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	<table border="1" style="width: 100%;"><tr><td>11868.92</td></tr></table>	11868.92	<table border="1" style="width: 100%;"><tr><td>11868.92</td></tr></table>	11868.92								
11868.92												
11868.92												
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
0.00												
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	<table border="1" style="width: 100%;"><tr><td>0.00</td></tr></table>	0.00										
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  
Local 399, International Union of Operating Engineers Federal PAC

Report Covering the Period: From: 

M	M
0	7

D	D
0	1

Y	Y	Y	Y
2	0	0	7

 To: 

M	M
1	2

D	D
3	1

Y	Y	Y	Y
2	0	0	7

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees	2150.00	8305.00
(i) Itemized (use Schedule A) .....	19460.00	138010.00
(ii) Unitemized .....	21610.00	146315.00
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry Totals to Line 33, page 5) .....	21610.00	146315.00
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)) .....	21610.00	146315.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	21610.00	146315.00

**DETAILED SUMMARY PAGE**

of Disbursements

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Page 4

<b>II. DISBURSEMENTS</b>	<b>COLUMN A Total This Period</b>	<b>COLUMN B Calendar Year-to-Date</b>
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.....	2958.04	29446.08
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	2958.04	29446.08
22. Transfers to Affiliated/Other Party Committees.....	100000.00	100000.00
23. Contributions to Federal Candidates/Committees..... and Other Political Committees.....	5000.00	5000.00
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.....	0.00	0.00
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))..	107958.04	134446.08
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	107958.04	134446.08

**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) .....	21610.00	146315.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	21610.00	146315.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	2958.04	29446.08
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	2958.04	29446.08

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

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

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

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

NAME OF COMMITTEE (In Full)  
Local 399, International Union of Operating Engineers Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
TOMMIE BURKE

Mailing Address 2932 S SHIELDS

City State Zip Code  
CHICAGO IL 60616

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

Name of Employer CITY OF CHICAGO Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 500.00

Date of Receipt: 09 / 04 / 2007  
Transaction ID: SA11AI.6436  
Amount of Each Receipt this Period: 500.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
JOSEPH COSTELLO

Mailing Address 12900 EAST PLAYFIELD DRIVE

City State Zip Code  
CRESTWOOD IL 60445-1107

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

Name of Employer METROPOLITAN WATER RECLAM- ATION DISTRIC Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt: 08 / 28 / 2007  
Transaction ID: SA11AI.6400  
Amount of Each Receipt this Period: 300.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
STEPHEN DALLAVALLE

Mailing Address 2637 AUTUMN DR

City State Zip Code  
ROUND LAKE IL 60073

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

Name of Employer ABM ENGINEERING Occupation Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt: 08 / 23 / 2007  
Transaction ID: SA11AI.6362  
Amount of Each Receipt this Period: 250.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... ► 1050.00

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

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

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

FOR LINE NUMBER: PAGE 7 / 12  
(check only one)  
 11a    11b    11c    12  
 13    14    15    16    17

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NAME OF COMMITTEE (In Full)  
Local 399, International Union of Operating Engineers Federal PAC

**A.** Full Name (Last, First, Middle Initial)  
RAYMOND MAGNUS

Mailing Address 5332 BRIARFIELD LANE

City State Zip Code  
LAKE IN THE HILLS IL 60156

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
ABM ENGINEERING Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 09 / 28 / 2007  
Transaction ID: SA11AI.6474  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**B.** Full Name (Last, First, Middle Initial)  
DAVID MURPHY

Mailing Address 1117 NORTH KNIGHT

City State Zip Code  
PARK RIDGE IL 60068

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
MDE THERMAL TECH Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 250.00

Date of Receipt 08 / 09 / 2007  
Transaction ID: SA11AI.6334  
Amount of Each Receipt this Period 250.00  
CONTRIBUTION

**C.** Full Name (Last, First, Middle Initial)  
BRENT STONE

Mailing Address 112 PEBBLE BEACH

City State Zip Code  
SPRINGFIELD IL 62704

FEC ID number of contributing federal political committee. C

Name of Employer Occupation  
STATE OF ILLINOIS Engineer

Receipt For:  Primary  General  Other (specify) ▼

Aggregate Year-to-Date ▼ 300.00

Date of Receipt 09 / 13 / 2007  
Transaction ID: SA11AI.6444  
Amount of Each Receipt this Period 300.00  
CONTRIBUTION

**SUBTOTAL** of Receipts This Page (optional) ..... 800.00

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

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

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

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NAME OF COMMITTEE (In Full)  
Local 399, International Union of Operating Engineers Federal PAC

<b>A.</b>	Full Name (Last, First, Middle Initial) SHAWN TOOMEY	Date of Receipt
	Mailing Address 13913 S JAMES DRIVE #1024	<input type="text" value="09"/> / <input type="text" value="13"/> / <input type="text" value="2007"/>
	City State Zip Code CRESTWOOD IL 60445	<b>Transaction ID:</b> SA11AI.6454
	FEC ID number of contributing federal political committee. <input type="text" value="C"/>	Amount of Each Receipt this Period <input type="text" value="300.00"/>
	Name of Employer Occupation CONRAD HOTEL Engineer	<b>CONTRIBUTION</b>
	Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date ▼ <input type="text" value="300.00"/>

<b>SUBTOTAL</b> of Receipts This Page (optional) .....	<input type="text" value="300.00"/>
<b>TOTAL</b> This Period (last page this line number only) .....	<input type="text" value="2150.00"/>



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

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

FOR LINE NUMBER: (check only one)

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

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NAME OF COMMITTEE (In Full)  
Local 399, International Union of Operating Engineers Federal PAC

A.	Full Name (Last, First, Middle Initial) Chicago Community Bank	Transaction ID: SB21B.6623 Date of Disbursement
	Mailing Address 1110 West 35th Street	<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City Chicago State IL Zip Code 60609	Amount of Each Disbursement this Period
	Purpose of Disbursement bank charge	<input type="text" value="4.50"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

B.	Full Name (Last, First, Middle Initial) Chicago Community Bank	Transaction ID: SB21B.6624 Date of Disbursement
	Mailing Address 1110 West 35th Street	<input type="text" value="07"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City Chicago State IL Zip Code 60609	Amount of Each Disbursement this Period
	Purpose of Disbursement NSF - prior period	<input type="text" value="50.00"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

C.	Full Name (Last, First, Middle Initial) Rider Dickerson, Inc.	Transaction ID: SB21B.6626 Date of Disbursement
	Mailing Address 815 Twenty-Fifth Avenue	<input type="text" value="09"/> / <input type="text" value="26"/> / <input type="text" value="2007"/>
	City Bellwood State IL Zip Code 60104	Amount of Each Disbursement this Period
	Purpose of Disbursement	<input type="text" value="352.04"/>
	Candidate Name	Category/Type
	Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	<input type="text" value="406.54"/>
<b>TOTAL</b> 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 10 / 12

<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)

Local 399, International Union of Operating Engineers Federal PAC

A.

Full Name (Last, First, Middle Initial)  
Standard Insurance Company

Mailing Address PO BOX 6339

City State Zip Code  
Portland OR 97228

Purpose of Disbursement  
Insurance

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB21B.6625

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 checked="" 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)

Local 399, International Union of Operating Engineers Federal PAC

A.

Full Name (Last, First, Middle Initial)

EPEC Voluntary Fund

Mailing Address 1125 Seventeenth Street N.W.

City Washington State DC Zip Code 20036

Purpose of Disbursement  
Contribution

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB22.6605

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 12 / 12

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

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NAME OF COMMITTEE (In Full)

Local 399, International Union of Operating Engineers Federal PAC

A.

Full Name (Last, First, Middle Initial)

JIM CAPPARELLI

Mailing Address PO BOX 1071

City NORTH RIVERSIDE State IL Zip Code 60546

Purpose of Disbursement

Candidate Name  
JIM CAPPARELLI

Office Sought:  House  
 Senate  
 President

State: IL District: 03

Disbursement For: 2007  
 Primary  General  
 Other (specify) ▼

Category/  
Type

Transaction ID: SB23.6634

Date of Disbursement

<sup>M</sup> 1	<sup>M</sup> 1	/	<sup>D</sup> 2	<sup>D</sup> 7	/	<sup>Y</sup> 2	<sup>Y</sup> 0	<sup>Y</sup> 0	<sup>Y</sup> 7
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Amount of Each Disbursement this Period

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

5000.00

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

5000.00