

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED FEB MAIL OPERATIONS CENTER

1991 OCT 18 A 10:40
Office Use Only

1. NAME OF COMMITTEE (In full) USE FEC MAILING LABEL OR TYPE OR PRINT Example: If typing, type over the lines. 12FE4M5

United Brotherhood of Carpenters and Joiners of America, Local 1024, P A C
327 N. Centre Street

ADDRESS (number and street)

Check if different than previously reported (ACC)

Cumberland MD 21502

2. FEC IDENTIFICATION NUMBER CITY STATE ZIP CODE

C00361923

3. IS THIS REPORT NEW OR AMENDED
 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 Year-End 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:	M M M M M M M M M M M M			in the State of
(d) 30-Day POST-Election Report for the:	General (30G)	Runoff (30R)	Special (30S)	
Election on:	M M M M M M M M M M M M			in the State of

5. Covering Period 07012003 through 09302003

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 E. William DuVall, II

Signature of Treasurer *E. William DuVall* Date 10092003

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

Office Use Only											FEC FORM 3X (Revised 1/01)
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**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Revised 1/01)

Page 2

Write or Type Committee Name

United Brotherhood of Carpenters and Joiners of America, Local 1024, P A C

Report Covering the Period: From: 07 01 2003 To: 09 30 2003

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
5. (a) Cash on Hand January 1, 2003	2,003	4,805.43
(b) Cash on Hand at Beginning of Reporting Period	5,875.67	
(c) Total Receipts (from Line 19)	7,209.00	1,991.14
(d) Subtotal (add Lines 5(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	6,596.57	6,796.57
7. Total Disbursements (from Line 30)	00	2,000.00
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	6,596.57	6,596.57
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	00	

This committee has qualified as a noncandidate 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

FEC Form 3X (Revised 1/01)

Page 3

Write or Type Committee Name

United Brotherhood of Carpenters and Joiners of America, Local 1024, P A C

Report Covering the Period: From: 0 7 0 1 2 0 0 3 To: 0 9 3 0 2 0 0 3

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)	7 2 0 9 0	
(ii) Unitemized	7 2 0 9 0	
(iii) TOTAL (add Lines 11(a)(i) and (ii)		1 9 9 1 1 4
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 32, page 4)		
12. Transfers From Affiliated/Other Party Committees		
13. All Loans Received		
14. Loan Repayments Received		
15. Offsets to Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 36, page 4)		
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees		
17. Other Federal Receipts (Dividends, Interest, etc.)		
18. Transfers from Nonfederal Account for Joint Activity		
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18)	7 2 0 9 0	1 9 9 1 1 4
20. Total Federal Receipts (subtract Line 18 from Line 19)	7 2 0 9 0	1 9 9 1 1 4

DETAILED SUMMARY PAGE
of Disbursements

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Shared Federal/Non-Federal Activity (from Schedule Hd)		
(i) Federal Share		
(ii) Non-Federal Share		
(b) Other Federal Operating Expenditures ..		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))		
22. Transfers to Affiliated/Other Party Committees		
23. Contributions to Federal Candidates/Committees and Other Political Committees		2 0 0 0 0
24. Independent Expenditures (use Schedule E)		
25. Coordinated Expenditures Made by Party Committees (2 U.S.C. §441a(d)) (use Schedule F)		
26. Loan Repayments Made		
27. Loans Made		
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees		
(b) Political Party Committees		
(c) Other Political Committees (such as PACs)		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))		
29. Other Disbursements		
30. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), and 29)		2 0 0 0 0
31. Total Federal Disbursements (subtract Line 21(a)(ii) from Line 30)		2 0 0 0 0
III. Net Contributions/Operating Expenditures		
32. Total Contributions (other than loans) (from Line 11(d), page 3)		
33. Total Contribution Refunds (from Line 28(d))		
34. Net Contributions (other than loans) (subtract Line 33 from Line 32)		
35. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))		
36. Offsets to Operating Expenditures (from Line 15, page 9)		
37. Net Operating Expenditures (subtract Line 36 from Line 35)		

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

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

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

NAME OF COMMITTEE (In Full)
United Brotherhood of Carpenters and Joiners of America, Local 1024, P A C

Full Name (Last, First, Middle Initial) A. Members of Carpenters Local 1024		Date of Receipt 09 30 2003
Mailing Address 327 N Centre St		Amount of Each Receipt this Period 720.90
City Cumberland	State MD	
FEC ID number of contributing federal political committee C 00361923		Amount of Each Receipt this Period 720.90
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date 720.90	

Full Name (Last, First, Middle Initial) B.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date	

Full Name (Last, First, Middle Initial) C.		Date of Receipt
Mailing Address		Amount of Each Receipt this Period
City	State	
FEC ID number of contributing federal political committee C		Amount of Each Receipt this Period
Name of Employer	Occupation	
Receipt For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Aggregate Year-to-Date	

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

SCHEDULE B (FEC Form 3X)

ITEMIZED DISBURSEMENTS

Use separate schedule for each category of the Detailed Summary Page	FOR LINE NUMBER: (check only one)				PAGE	OF
	<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 type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
United Brotherhood of Carpenters and Joiners of America, Local 1024, P A C

A.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: [] [] [] [] [] []

Amount of Each Disbursement this Period: [] [] [] [] [] []

Category/Type: [] [] [] [] [] []

B.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: [] [] [] [] [] []

Amount of Each Disbursement this Period: [] [] [] [] [] []

Category/Type: [] [] [] [] [] []

C.

Full Name (Last, First, Middle Initial) _____

Mailing Address _____

City _____ State _____ Zip Code _____

Purpose of Disbursement _____

Candidate Name _____

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) _____

State: _____ District: _____

Date of Disbursement: [] [] [] [] [] []

Amount of Each Disbursement this Period: [] [] [] [] [] []

Category/Type: [] [] [] [] [] []

SUBTOTAL of Disbursements This Page (optional) _____

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

Federal Election Commission

ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS

The Commission has added this page to the end of this filing to indicate how it was received.

<input type="checkbox"/>	Hand Delivered	Date of Receipt
<input type="checkbox"/>	First Class Mail	POSTMARKED
<input checked="" type="checkbox"/>	Registered/Certified Mail	POSTMARKED (R/C)
<input type="checkbox"/>	No Postmark	
<input checked="" type="checkbox"/>	Postmark Legible	
<input type="checkbox"/>	Received from the House office of Records and Registration	Date of Receipt
<input type="checkbox"/>	Received from the Senate Office of Public Records	Date of Receipt
<input type="checkbox"/>	Other (Specify):	Postmarked and/or Date of Receipt
<input type="checkbox"/>	Electronic Filing	
<i>JMD</i> PREPARER		<i>10-18-03</i> DATE PREPARED