

RECEIVED
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**FEC
FORM 3X**

**REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF
COMMITTEE (in full)

TYPE OR PRINT ▼

Example: If typing, type
over the lines.

12FE4M5

PLASTERERS LOCAL 8 PAC FUND

OPERATIVE PLASTERERS - CEMENT MASONS INT'L

ADDRESS (number and street)

2535 ORTHODOX STREET



Check if different
than previously
reported. (ACC)

PHILADELPHIA

PA

19137-1624

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

000319905

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
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



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

01

01

2009

through

06

30

2009

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

THOMAS J. KILKENNY, JR.

Signature of Treasurer

Thomas J. Kilkenny, Jr.

Date

07

16

2009

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

Office
Use
Only

FEC FORM 3X
Rev. 12/2004

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

PLASTERERS LOCAL 8 PAC FUND

Report Covering the Period:

From:

01 / 01 / 2009

To:

06 / 30 / 2009

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2009		736794
(b) Cash on Hand at Beginning of Reporting Period.....	736794	
(c) Total Receipts (from Line 19)	1777526	1777526
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)	2514320	2514320
7. Total Disbursements (from Line 31)	1734060	1734060
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	780260	780260
9. Debts and Obligations Owed TO the Committee (itemize all on Schedule C and/or Schedule D)	0	
10. Debts and Obligations Owed BY the Committee (itemize all on Schedule C and/or Schedule D)	0	



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

FEC Form 3X (Rev. 02/2003)

Page 3

Write or Type Committee Name

PLASTERERS LOCAL 8 PAC FUND

Report Covering the Period:

From:

01 / 01 / 2009

To:

06 / 30 / 2009

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).....

(ii) Unitemized.....

(iii) TOTAL (add

Lines 11(a)(i) and (ii).....▶

(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 33, page 5).....▶

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 37, page 5).....

16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....

17. Other Federal Receipts

(Dividends, Interest, etc.).....

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

(b) Levin Funds (from Schedule H5).....

(c) Total Transfers (add 18(a) and 18(b))..

19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c)).....▶

20. Total Federal Receipts

(subtract Line 18(c) from Line 19).....▶

0

1697526

1697526

0

0

1697526

0

0

0

0

80000

0

0

0

0

0

0

0

1777526

1777526

0

1697526

1697526

0

0

1697526

0

0

0

0

80000

0

0

0

0

0

0

0

1777526

1777526

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0	0
(ii) Non-Federal Share	0	0
(b) Other Federal Operating Expenditures	943049	943049
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	943049	943049
22. Transfers to Affiliated/Other Party Committees	0	0
23. Contributions to Federal Candidates/Committees and Other Political Committees	0	0
24. Independent Expenditures (use Schedule E)	0	0
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F)	0	0
26. Loan Repayments Made	0	0
27. Loans Made	0	0
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0	0
(b) Political Party Committees	0	0
(c) Other Political Committees (such as PACs)	0	0
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0	0
29. Other Disbursements	791011	791011
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0	0
(ii) "Levin" Share	0	0
(b) Federal Election Activity Paid Entirely With Federal Funds	0	0
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0	0
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	1734060	1734060
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	1734060	1734060

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**DETAILED SUMMARY PAGE
of Disbursements**

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Ex- penditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	1697526	1697526
34. Total Contribution Refunds (from Line 28(d))	0	0
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	1697526	1697526
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	943049	943049
37. Offsets to Operating Expenditures (from Line 15, page 3)	80000	80000
38. Net Operating Expenditures (subtract Line 37 from Line 36)	863049	863049

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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

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

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. GAS WORKS EMPLOYEES UNION OF PHILADELPHIA LOCAL 686 SEIU AFL-CIO

Mailing Address

7526 FRANKFORD AVENUE

City

PHILADELPHIA

State

PA

Zip Code

19136

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

80000

REIMB. 03/13/09 FUNDRAISING COST

Date of Receipt

04 / 01 / 2009

Amount of Each Receipt this Period

80000

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....▶

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

80000

80000

**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 1 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (in Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. PNC BANK Mailing Address		Date of Disbursement 01/01/2009	
City PHILADELPHIA	State PA	Zip Code	
Purpose of Disbursement BANK CHARGE		Category/ Type 001	Amount of Each Disbursement this Period 5.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

B. PNC BANK Mailing Address		Date of Disbursement 01/02/2009	
City PHILADELPHIA	State PA	Zip Code	
Purpose of Disbursement BANK CHARGE		Category/ Type 001	Amount of Each Disbursement this Period 5.00
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

C. PLASTERERS LOCAL 8 GENERAL FUND Mailing Address 2535 ORTHODOX STREET		Date of Disbursement 01/20/2009	
City PHILADELPHIA	State PA	Zip Code 19137-1624	
Purpose of Disbursement WAGE REIMBURSEMENT		Category/ Type 001	Amount of Each Disbursement this Period 2678.16
Candidate Name			
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:			

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

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

2688.16

29030122887

**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 2 OF 7

☒ 21b 22 23 24 25 26
27 28a 28b 28c 29 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

Date of Disbursement

01/20/2009

A. PLASTERERS LOCAL 8 GENERAL FUND

Mailing Address

2535 ORTHODOX STREET

City

PHILADELPHIA

State

PA

Zip Code

19137-1624

Purpose of Disbursement

COPYING COSTS

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

425

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

01/30/2009

B. PNC BANK

Mailing Address

City

PHILADELPHIA

State

PA

Zip Code

Purpose of Disbursement

BANK CHARGE

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

500

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Full Name (Last, First, Middle Initial)

Date of Disbursement

02/10/2009

C. PLASTERERS LOCAL 8 GENERAL FUND

Mailing Address

2535 ORTHODOX STREET

City

PHILADELPHIA

State

PA

Zip Code

19137-1624

Purpose of Disbursement

COPYING COSTS

Candidate Name

001
Category/
Type

Amount of Each Disbursement this Period

2150

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

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

3075

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 3 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		02 / 10 / 2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 1664
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. PNC BANK		Date of Disbursement
Mailing Address		04 / 01 / 2009
City PHILADELPHIA	State PA	Zip Code
Purpose of Disbursement BANK CHARGE	Candidate Name	Amount of Each Disbursement this Period 500
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		04 / 10 / 2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement COPIING COSTS	Candidate Name	Amount of Each Disbursement this Period 3900
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

6064

29030122889

**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 4 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 OATHOODX STREET		04 / 10 / 2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 1098
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:		

B. WILLIAM TAYLOR		Date of Disbursement
Mailing Address 340 ROCKLEDGE AVENUE		05 / 01 / 2009
City HUNTINGDON VALLEY	State PA	Zip Code 19006
Purpose of Disbursement CAMPAIGN EXPENSES - MEALS	Candidate Name	Amount of Each Disbursement this Period 40000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 007
State: District:		

C. PNC BANK		Date of Disbursement
Mailing Address		05 / 05 / 2009
City PHILADELPHIA	State PA	Zip Code
Purpose of Disbursement BANK CHARGE	Candidate Name	Amount of Each Disbursement this Period 1000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:		

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

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

42098

29030122890

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 5 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		05/08/2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement COPYING COSTS	Candidate Name	Amount of Each Disbursement this Period 1375
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:		

B. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		05/08/2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement WAGE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 206038
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:		

C. SKLAR CARMOSIN + COMPANY		Date of Disbursement
Mailing Address 801 OLD YORK ROAD - SUITE ONE NOBLE PLAZA		05/12/2009
City JENKINTOWN	State PA	Zip Code 19046
Purpose of Disbursement ACCOUNTING	Candidate Name	Amount of Each Disbursement this Period 144000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	Category/Type 001
State: District:		

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

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

351413

29030122891

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

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. DEBBIE'S DELI		Date of Disbursement
Mailing Address 4400 GARDEN STREET		03/19/2009
City PHILADELPHIA	State PA	Zip Code 19137
Purpose of Disbursement ELECTION DAY LUNCH	Candidate Name	Amount of Each Disbursement this Period 107.50
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

B. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		06/09/2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement POSTAGE	Candidate Name	Amount of Each Disbursement this Period 769
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

C. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		06/09/2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement WAGE REIMBURSEMENT	Candidate Name	Amount of Each Disbursement this Period 2407.14
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

2522.33

29030122892

**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 7 OF 7

☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. PLASTERERS LOCAL 8 GENERAL FUND		Date of Disbursement
Mailing Address 2535 ORTHODOX STREET		06 / 09 / 2009
City PHILADELPHIA	State PA	Zip Code 19137-1624
Purpose of Disbursement COMING COSTS	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type
State: District:		1850

B. SKLAR CARMOSIN & COMPANY		Date of Disbursement
Mailing Address 801 OLD YORK ROAD - SUITE ONE NOBLE PLAZA		06 / 23 / 2009
City JENKINTOWN	State PA	Zip Code 19046
Purpose of Disbursement ACCOUNTING	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	001 Category/ Type
State: District:		17500

C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:		

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

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

19350

943049

29030122893

**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 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. COMMITTEE TO RE-ELECT LEN BROWN DIST. JUDGE

Mailing Address

1859 HOLLANDALE DRIVE

City

BENSALEM

State

PA

Zip Code

19020

Purpose of Disbursement

CONTRIBUTION

Candidate Name

011

Category/
Type

Date of Disbursement

02 / 18 / 2009

Amount of Each Disbursement this Period

50000

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

JUDGE-BUCKS COUNTY PA DIST. CT.

Full Name (Last, First, Middle Initial)

B. YOUR PLATE OR MINE CATERERS

Mailing Address

1414 HAMPTON LANE

City

WARMINSTER

State

PA

Zip Code

18974

Purpose of Disbursement

FUNDRAISING BREAKFAST

Candidate Name

JIMMY LYNN

007

Category/
Type

Date of Disbursement

03 / 13 / 2009

Amount of Each Disbursement this Period

120000

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

JUDGE-PA COMMONWEALTH COURT

Full Name (Last, First, Middle Initial)

C. COMMITTEE TO ELECT FRAN SHIELDS

Mailing Address

325 CHESTNUT STREET, SUITE 8515

City

PHILADELPHIA

State

PA

Zip Code

19106-2614

Purpose of Disbursement

CONTRIBUTION

Candidate Name

FRAN SHIELDS

011

Category/
Type

Date of Disbursement

04 / 02 / 2009

Amount of Each Disbursement this Period

50000

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

PHILA. COURT OF COMMON PLEAS JUDGE

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

220000

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

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

Use separate schedule(s)
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FOR LINE NUMBER:
(check only one)

PAGE 2 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. DAVID LINSALATA		Date of Disbursement
Mailing Address 1376 CURTIS ROAD		04 / 22 / 2009
City SOUTHAMPTON	State PA	Zip Code 18966
Purpose of Disbursement FUNDRAISING BREAKFAST SIGNS DELIVERY		Amount of Each Disbursement this Period 6011
Candidate Name JIMMY LYNN		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	JUDGE - PA COMMONWEALTH COURT	

B. COMMITTEE TO ELECT JUDGE JIMMY LYNN		Date of Disbursement
Mailing Address 925 HARVEST DRIVE, P.O. BOX 3010		04 / 23 / 2009
City BLUE BELL	State PA	Zip Code 19422
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 100000
Candidate Name JIMMY LYNN		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	JUDGE - PA COMMONWEALTH COURT	

C. Mc CAFFERY FOR DISTRICT ATTORNEY		Date of Disbursement
Mailing Address P.O. BOX 51251		05 / 06 / 2009
City PHILADELPHIA	State PA	Zip Code 19115
Purpose of Disbursement CONTRIBUTION		Amount of Each Disbursement this Period 250000
Candidate Name DANIEL Mc CAFFERY		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	
State: District:	PHILADELPHIA DISTRICT ATTORNEY	

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

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

356011

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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)

PAGE 3 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

Date of Disbursement

05 / 13 / 2009

A. **FRIENDS TO ELECT DONNA WOELPPER FOR JUDGE**

Mailing Address

7029 VOIGT ROAD

City

PHILADELPHIA

State

PA

Zip Code

19128

Purpose of Disbursement

CONTRIBUTION

Candidate Name

DONNA WOELPPER

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

PHILA. COURT OF COMMON PLEAS JUDGE

011
Category/
Type

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

B. **FRIENDS OF ROXANNE CONINGTON**

Mailing Address

2112 WALNUT STREET

City

PHILADELPHIA

State

PA

Zip Code

19103

Purpose of Disbursement

CONTRIBUTION

Candidate Name

ROXANNE CONINGTON

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

PHILA. COURT OF COMMON PLEAS JUDGE

011
Category/
Type

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. **COMMITTEE TO ELECT FRAN SHIELDS**

Mailing Address

325 CHESTNUT STREET, SUITE 4515

City

PHILADELPHIA

State

PA

Zip Code

19106-2614

Purpose of Disbursement

CONTRIBUTION

Candidate Name

FRAN SHIELDS

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☒ Primary ☐ General
☐ Other (specify) ▼

State:

District:

PHILA. COURT OF COMMON PLEAS JUDGE

011
Category/
Type

Amount of Each Disbursement this Period

500.00

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

1250.00

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

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

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FOR LINE NUMBER:
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PAGE 4 OF 4

☐ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☒ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

PLASTERERS LOCAL 8 PAC FUND

Full Name (Last, First, Middle Initial)

A. FRIENDS OF BRENDAN BOYLE		Date of Disbursement
Mailing Address 602 AVON ROAD		05/13/2009
City PHILADELPHIA	State PA	Zip Code 19116
Purpose of Disbursement CONTRIBUTION	Candidate Name BRENDAN BOYLE	Amount of Each Disbursement this Period 50000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) PA STATE REPRESENTATIVE - 170 DIST.	
State: District:		

B. CANDIDATE FOR JUDGE JOE WATERS		Date of Disbursement
Mailing Address 1518 WALNUT STREET, SUITE 906		05/13/2009
City PHILADELPHIA	State PA	Zip Code 19102
Purpose of Disbursement CONTRIBUTION	Candidate Name JOE WATERS	Amount of Each Disbursement this Period 40000
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) PHILADELPHIA MUNICIPAL COURT JUDGE	
State: District:		

C.		Date of Disbursement
Mailing Address		
City	State	Zip Code
Purpose of Disbursement	Candidate Name	Amount of Each Disbursement this Period
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) 	
State: District:		

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

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

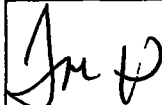
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PREPARER
(3/2005)

7/20/09
DATE PREPARED

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