



**SUMMARY PAGE**  
**OF RECEIPTS AND DISBURSEMENTS**

Write or Type Committee Name  
IBEW 349 Electro-PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

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		61829.09
Y	Y	Y	Y							
2	0	1	0							
(b) Cash on Hand at Beginning of Reporting Period .....	22583.77									
(c) Total Receipts (from Line 19) .....	7614.10	78512.36								
(d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B) .....	30197.87	140341.45								
7. Total Disbursements (from Line 31) .....	10937.00	121080.58								
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	19260.87	19260.87								
9. Debts and Obligations owed <b>TO</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									
10. Debts and Obligations owed <b>BY</b> the committee (Itemize all on Schedule C and/or Schedule D) .....	0.00									

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

**For further information contact:**

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

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

**DETAILED SUMMARY PAGE  
OF RECEIPTS**

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name  
IBEW 349 Electro-PAC

Report Covering the Period: From: 

M	M
1	0

D	D
1	4

Y	Y	Y	Y
2	0	1	0

 To: 

M	M
1	1

D	D
2	2

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 .....	7606.09	76142.68
(iii) TOTAL (add Lines 11(a)(i) and (ii) .....	7606.09	76142.68
(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) .....	7606.09	76142.68
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	2322.95
17. Other Federal Receipts (Dividends, Interest, etc.) .....	8.01	46.73
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)) .....	7614.10	78512.36
20. Total Federal Receipts (subtract Line 18(c) from Line 19) .....	7614.10	78512.36

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

<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.....	4437.00	28330.58
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))..... ▶	4437.00	28330.58
22. Transfers to Affiliated/Other Party Committees.....	2500.00	57500.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	1750.00	31000.00
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	-500.00	-500.00
(c) Other Political Committees (such as PACs) .....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)) .....	-500.00	-500.00
29. Other Disbursements.....	2750.00	4750.00
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))..	10937.00	121080.58
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	10937.00	121080.58

**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) .....	7606.09	76142.68
34. Total Contribution Refunds (from Line 28(d)) .....	-500.00	-500.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	8106.09	76642.68
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)).....	4437.00	28330.58
37. Offsets to Operating Expenditures (from Line 15, page 3) .....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) .....	4437.00	28330.58

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

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

FOR LINE NUMBER: (check only one)

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

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

NAME OF COMMITTEE (In Full)  
IBEW 349 Electro-PAC

A.	Full Name (Last, First, Middle Initial) BELLOWS ASSOCIATES	Transaction ID: SB21B.4677 Date of Disbursement 11 / 11 / 2010
	Mailing Address 130 S. University Drive Suite D	Amount of Each Disbursement this Period 432.00
	City Plantation State FL Zip Code 33324	
	Purpose of Disbursement Accounting services 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) LCR	Transaction ID: SB21B.4669 Date of Disbursement 10 / 21 / 2010
	Mailing Address 13627 Deering Bay Drive Suite 603	Amount of Each Disbursement this Period 2000.00
	City Miami State FL Zip Code 33158	
	Purpose of Disbursement Consulting fee 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) LCR	Transaction ID: SB21B.4691 Date of Disbursement 11 / 11 / 2010
	Mailing Address 13627 Deering Bay Drive Suite 603	Amount of Each Disbursement this Period 2000.00
	City Miami State FL Zip Code 33158	
	Purpose of Disbursement Consulting fee 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) .....	<b>4432.00</b>
<b>TOTAL</b> This Period (last page this line number only) .....	<b>4432.00</b>

**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)

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<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)  
IBEW 349 Electro-PAC

A.

Full Name (Last, First, Middle Initial)  
SOUTH FLORIDA AFLCIO COPE FUND

Transaction ID: SB22.4667

Date of Disbursement

Mailing Address 2500 NW 97 AVENUE  
SUITE 201

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

City State Zip Code  
MIAMI FL 33172

Amount of Each Disbursement this Period

2500.00
---------

Purpose of Disbursement  
Donation

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  Primary  General  
 Other (specify) ▼

State: District:

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

2500.00
---------

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

2500.00
---------

**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 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)  
IBEW 349 Electro-PAC

**A.**

Full Name (Last, First, Middle Initial)  
ASPA SOUTH FLORIDA CHAPTER

**Transaction ID:** SB23.4665  
**Date of Disbursement**

Mailing Address 111 NW 1 STREET  
STE 320

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

City State Zip Code  
MIAMI FL 33128

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Donation

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**B.**

Full Name (Last, First, Middle Initial)  
CITIZENS TO ELECT DION F. GUTHRIE

**Transaction ID:** SB23.4676  
**Date of Disbursement**

Mailing Address C/O TAMMY BACZYNSKYJ, TREASURER  
230 FOSTER KNOLL DRIVE

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

City State Zip Code  
JOPPATOWNE MD 21085

Amount of Each Disbursement this Period

250.00
--------

Purpose of Disbursement  
Campaign contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

**C.**

Full Name (Last, First, Middle Initial)  
EUGENE FLINN CAMPAIGN

**Transaction ID:** SB23.4674  
**Date of Disbursement**

Mailing Address C/O MCHENRY HAMILTON  
9485 SUNSET DRIVE, #A-280

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

City State Zip Code  
MIAMI FL 33173

Amount of Each Disbursement this Period

500.00
--------

Purpose of Disbursement  
Campaign contribution

--

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

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

1250.00
---------

**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)

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<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)  
IBEW 349 Electro-PAC

A.	Full Name (Last, First, Middle Initial) JEFF GREENE CAMPAIGN		Transaction ID: SB23.4675	
	Mailing Address 2929 N. EDGEHILL LANE ATTN: MS. CATHERINE EDGE		Date of Disbursement 10 / 22 / 2010	
City COOPER CITY		State FL	Zip Code 33026	Amount of Each Disbursement this Period 500.00
Purpose of Disbursement Campaign contribution		Category/ Type		
Candidate Name		Disbursement For:		
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President		<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼		
State: District:				

<b>SUBTOTAL</b> of Disbursements This Page (optional) .....	500.00
<b>TOTAL</b> This Period (last page this line number only) .....	1750.00

**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)

PAGE 10 / 11

<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 checked="" type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)  
IBEW 349 Electro-PAC

A.

Full Name (Last, First, Middle Initial)  
DARREN SOTO CAMPAIGN

Mailing Address 419 NORTH MAGNOLIA AVENUE

City State Zip Code  
ORLANDO FL 32801

Purpose of Disbursement  
Contribution refund - voided check

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB28B.4662

Date of Disbursement

10 / 28 / 2010

Amount of Each Disbursement this Period

-500.00

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

-500.00

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

-500.00

**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)

PAGE 11 / 11

<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)  
IBEW 349 Electro-PAC

**A.** Full Name (Last, First, Middle Initial)  
COMMITTEE TO PROTECT FLORIDA

Mailing Address P. O. BOX 10205

City TALLAHASSEE State FL Zip Code 32302

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.4681

Date of Disbursement

10 / 18 / 2010

Amount of Each Disbursement this Period

2500.00

**B.** Full Name (Last, First, Middle Initial)  
MAJIC CHILDREN'S FUND

Mailing Address 20450 NW 2nd Avenue

City MIAMI State FL Zip Code 33169

Purpose of Disbursement  
Donation

Candidate Name

Category/  
Type

Office Sought:  House  
 Senate  
 President

Disbursement For:  
 Primary  General  
 Other (specify) ▼

State: District:

Transaction ID: SB29.4678

Date of Disbursement

10 / 26 / 2010

Amount of Each Disbursement this Period

250.00

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

2750.00

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

2750.00