

**SUMMARY PAGE
OF RECEIPTS AND DISBURSEMENTS**

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

United Brotherhood of Carpenters and Joiners of America Local Union 1024 PAC

Report Covering the Period:

From:

01 / 01 / 2014

To:

03 / 31 / 2014

**COLUMN A
This Period**

**COLUMN B
Calendar Year-to-Date**

6. (a) Cash on Hand January 1,	2014	1,420,527
(b) Cash on Hand at Beginning of Reporting Period.....	1,420,527	
(c) Total Receipts (from Line 19).....	687,16	687,16
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	1,489,243	1,489,243
7. Total Disbursements (from Line 31).....	300,000	300,000
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)).....	1,189,243	1,189,243
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D).....		
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....		



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

14031211931

DETAILED SUMMARY PAGE

of Disbursements

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		
(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.....		
24. Independent Expenditures (use Schedule E)		
25. Coordinated Party Expenditures (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	3 0 0 0 0 0	3 0 0 0 0 0
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share		
(ii) "Levin" Share.....		
(b) Federal Election Activity Paid Entirely With Federal Funds		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)).....		
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))..	3 0 0 0 0 0	3 0 0 0 0 0
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....		

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DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

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

14031211934

**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 3
	<input type="checkbox"/> 21b <input type="checkbox"/> 27	<input type="checkbox"/> 22 <input type="checkbox"/> 28a	<input type="checkbox"/> 20 <input type="checkbox"/> 28b	<input type="checkbox"/> 24 <input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 25 <input type="checkbox"/> 29	<input type="checkbox"/> 26 <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)
United Brotherhood of Carpenters and Joiners of America Local Union 1024 PAC

A.

Full Name (Last, First, Middle Initial)
Friends of Tom Hucker

Date of Disbursement
01 / 03 / 2014

Mailing Address
10 Stockton Road

City: Silver Spring State: MD Zip Code: 20901

Purpose of Disbursement
Campaign Donation

Candidate Name
Tom Hucker

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MD District: 20

Amount of Each Disbursement this Period
5 0 0 0 0

B.

Full Name (Last, First, Middle Initial)
Friends of Doug Gansler

Date of Disbursement
01 / 06 / 2014

Mailing Address
PO Box 31102

City: Bethesda State: MD Zip Code: 20824

Purpose of Disbursement
Campaign Donation

Candidate Name
Doug Gansler

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MD District: Governor

Amount of Each Disbursement this Period
5 0 0 0 0

C.

Full Name (Last, First, Middle Initial)
Friends of David Sloan

Date of Disbursement
01 / 06 / 2014

Mailing Address
PO Box 653

City: Oxon Hill State: MD Zip Code: 20745

Purpose of Disbursement
Campaign Donation

Candidate Name
David Sloan

Office Sought: House Senate President

Disbursement For: Primary General Other (specify) ▼

State: MD District: 26

Amount of Each Disbursement this Period
5 0 0 0 0

SUBTOTAL of Disbursements This Page (optional).....▶ 1 5 0 0 0 0

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)						PAGE 2 OF 3				
	<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 checked="" type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29

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NAME OF COMMITTEE (In Full)
United Brotherhood of Carpenters and Joiners of America Local Union 1024 PAC

14031211936

Full Name (Last, First, Middle Initial) A. Friends of Elizabeth Paul		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address PO Box 40		Amount of Each Disbursement this Period 500.00
City Fankstown	State MD	
Zip Code 21734		Category/Type []
Purpose of Disbursement Campaign Donation		
Candidate Name Elizabeth Paul		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) <input type="checkbox"/>		
State: MD District: 2A		

Full Name (Last, First, Middle Initial) B. Friends of David Sloan		Date of Disbursement MM / DD / YYYY 02 / 14 / 2014
Mailing Address PO Box 653		Amount of Each Disbursement this Period 250.00
City Oxon Hill	State MD	
Zip Code 20745		Category/Type []
Purpose of Disbursement Campaign Donation		
Candidate Name David Sloan		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) <input type="checkbox"/>		
State: MD District: 26		

Full Name (Last, First, Middle Initial) C. Nick Scarpelli for House of Delegates		Date of Disbursement MM / DD / YYYY 02 / 26 / 2014
Mailing Address 111 S. George St. #1		Amount of Each Disbursement this Period 500.00
City Cumberland	State MD	
Zip Code 21502		Category/Type []
Purpose of Disbursement Campaign Donation		
Candidate Name Nick Scarpelli		Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General Other (specify) <input type="checkbox"/>		
State: MD District: 1-C		

SUBTOTAL of Disbursements This Page (optional).....	1250.00
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 3 OF 3
	<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 20	<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)
United Brotherhood of Carpenters and Joiners of America Local Union 1024 PAC

Full Name (Last, First, Middle Initial)

A. Gary McCallister WV Delegate

Mailing Address
PO Box 192

City **Sod** State **WV** Zip Code **25564**

Purpose of Disbursement
Campaign Donation

Candidate Name
Gary McCallister

Office Sought: House Senate President
State: **WV** District: **22**

Disbursement For: Primary General Other (specify) **▼**

Date of Disbursement

MM / DD / YYYY
03 / 07 / 2014

Amount of Each Disbursement this Period

Amount: **250.00**

Category/Type

Full Name (Last, First, Middle Initial)

B. Friends of Sara Beth James

Mailing Address
17900 Old Dan's Rock Rd.

City **Frostburg** State **MD** Zip Code **21532**

Purpose of Disbursement
Campaign Donation

Candidate Name
Sara Beth James

Office Sought: House Senate President
State: **MD** District: **Brd. of Education**

Disbursement For: Primary General Other (specify) **▼**

Date of Disbursement

MM / DD / YYYY
03 / 20 / 2014

Amount of Each Disbursement this Period

Amount: **250.00**

Category/Type

Full Name (Last, First, Middle Initial)

C. Nicole Wagoner City Council

Mailing Address
PO Box 4

City **Cumberland** State **MD** Zip Code **21502**

Purpose of Disbursement
"VOIDED CHECK" 100

Candidate Name
Nicole Wagoner

Office Sought: House Senate President
State: **MD** District: **Cumberland City Council**

Disbursement For: Primary General Other (specify) **▼**

Date of Disbursement

MM / DD / YYYY
03 / 31 / 2014

Amount of Each Disbursement this Period

Amount: **-250.00**

Category/Type

Check Date **9/20/2012**

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

Amount: **250.00**

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

Amount: **3000.00**

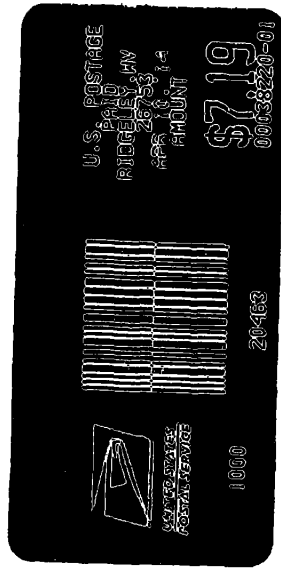
14031211937

Stone + Mountain + Lakes
Regional Council of Carpenters
7 N. Centre St.
Pomerland, MD 21502

140 312 11938



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WASHINGTON, DC 20463

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<input type="checkbox"/> USPS Priority Mail Express	Postmarked
<input type="checkbox"/> Postmark Illegible	
<input type="checkbox"/> No Postmark	
<input type="checkbox"/> Overnight Delivery Service (Specify):	Shipping Date
Next Business Day Delivery	<input type="checkbox"/>
<input type="checkbox"/> Received from House Records & Registration Office	Date of Receipt
<input type="checkbox"/> Received from Senate Public Records Office	Date of Receipt
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<input type="checkbox"/> Other (Specify):	Date of Receipt or Postmarked

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 PREPARER
 (8/2013)

4/14/14
 DATE PREPARED